

MAESTEG URBAN DISTRICT COUNCIL



A N N U A L

R E P O R T


Of The  
MEDICAL OFFICER OF HEALTH

For the Year

- 1951 -

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S.C.J. FALKMAN,  
D.R.C.O.G., D.P.H.,  
Medical Officer of Health.



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MEMBERS OF THE COUNCIL

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Councillor Arthur D. Edwards, J.P., Chairman

Councillor T.J. Jones, Vice-Chairman

Councillors : E. Llewellyn Thomas; M.G. Griffiths; D.M. Thomas;  
D.C. Watkins; Brinley Richards; Morgan Jones; Mrs. M.A. Harries;  
Richard Mordecai; T.G. Bowen; E.J. Llewellyn; Edgar Thomas;  
Stanley Lewis; Mrs. E. Kennedy; County Councillor Llewellyn Evans.

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PUBLIC HEALTH OFFICERS OF THE LOCAL AUTHORITY

---

Medical Officer of Health, Maesteg U.D.C.; Assistant Medical Officer  
for Maternity & Child Welfare, Diphtheria Immunisation, Dental  
Anaesthetics and Schools (Glamorgan County Council) :

S.C.J. FALKMAN, L.R.C.P. (Ed)., L.R.C.S. (Ed).,  
L.R.F.P. & S. (Glas)., L.M. Rotunda (Dublin),  
D.R.C.O.G. (London), D.P.H. (Durham).

---

Sanitary Inspectors :

D. MORGAN THOMAS, Chief Sanitary Inspector,  
M.R. San. I., M.R.I.P.H.H., Cert. R.S.I. and Meat & Foods  
Cert. R.S.I.  
General Hygiene Diploma (Adv)., and School Hygiene  
Diploma, Royal Institute of Public Health  
and Hygiene.

IVOR DAVIES, B.Sc., Sanitary Inspector  
Cert. R.S.I., and Meat & Foods Cert. R.S.I.

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Clerk :

DAVID B. THOMAS

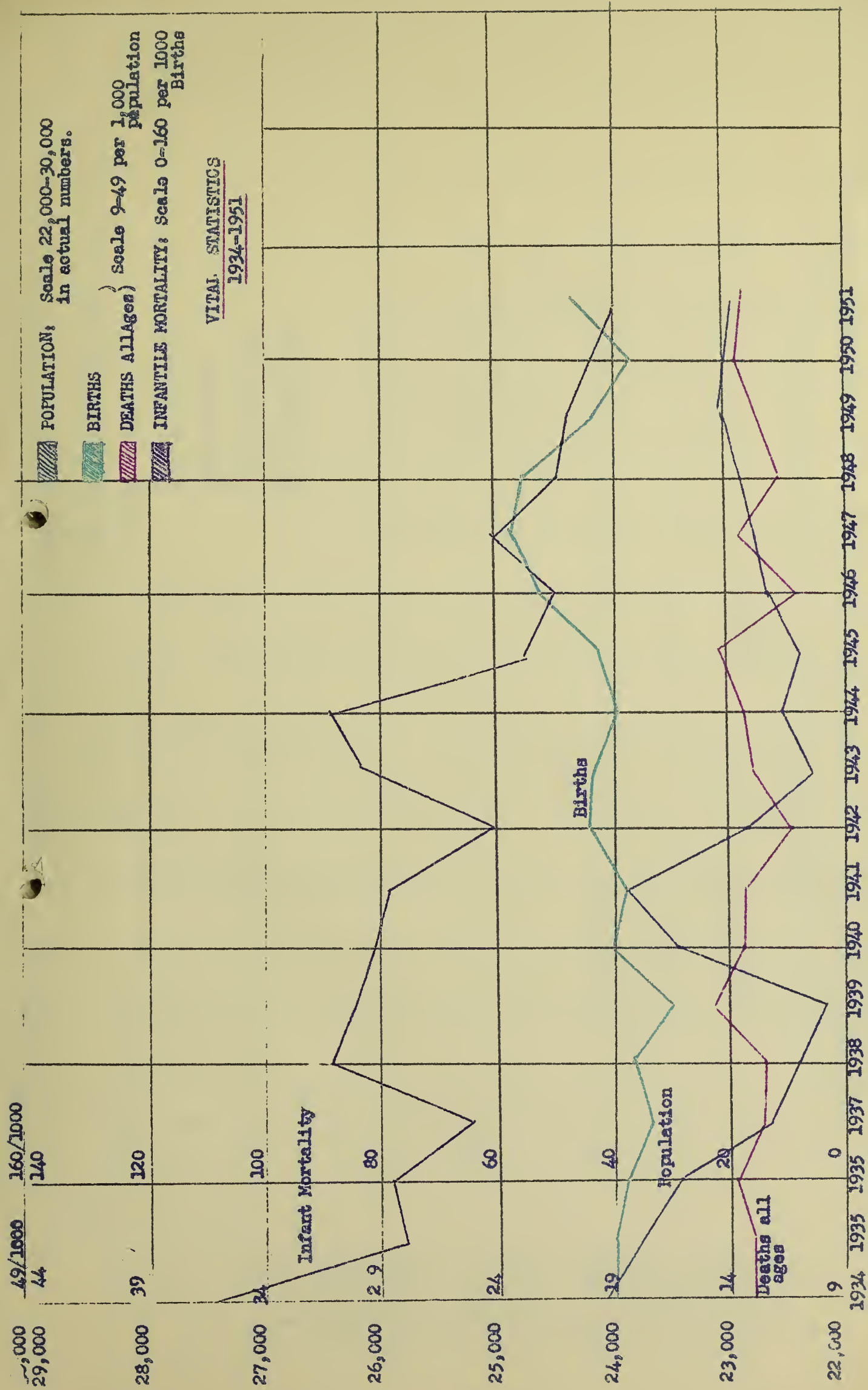
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Rodent Operative :

HAROLD M. BARROW

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Deaths from

PRINCIPAL INFECTIOUS DISEASES 1934 - 1950

in actual numbers

- Total Deaths
- Diphtheria
- Scarlet Fever
- Enteric Fever

Total deaths

Enteric Fever

Diphtheria

Scarlet Fever

1934 1935 1936 1937 1938 1939 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951  
S.C.J. FALKMAN.

35

30

25

20

15

10

5





19

18

27

16

15

14

13

12

11

10

9

8

7

6

5

4

3

2

1

0

1934 1935 1936 1937 1938 1939 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950  
SGT. FALKMAN

DEATHS FROM  
PRINCIPAL INFECTIOUS DISEASES.

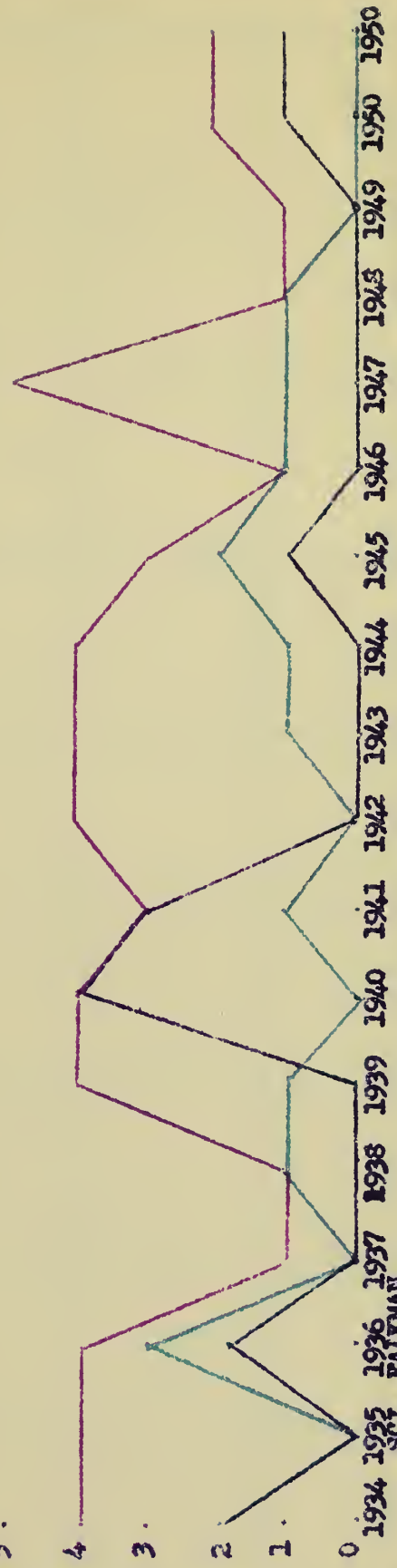
1934 - 1950

IN ACTUAL NUMBERS

Whooping Cough

Diarrhoea

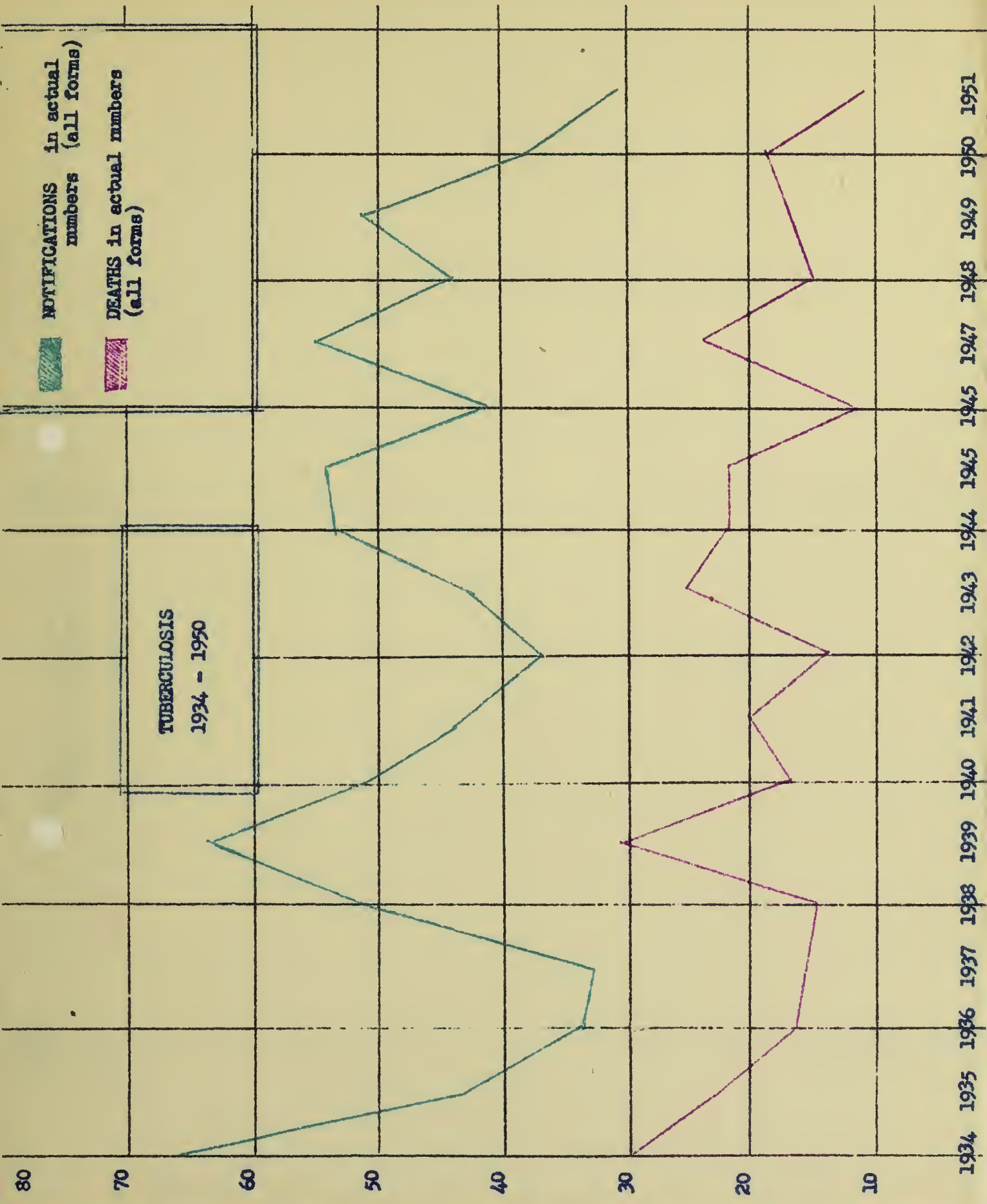
Measles





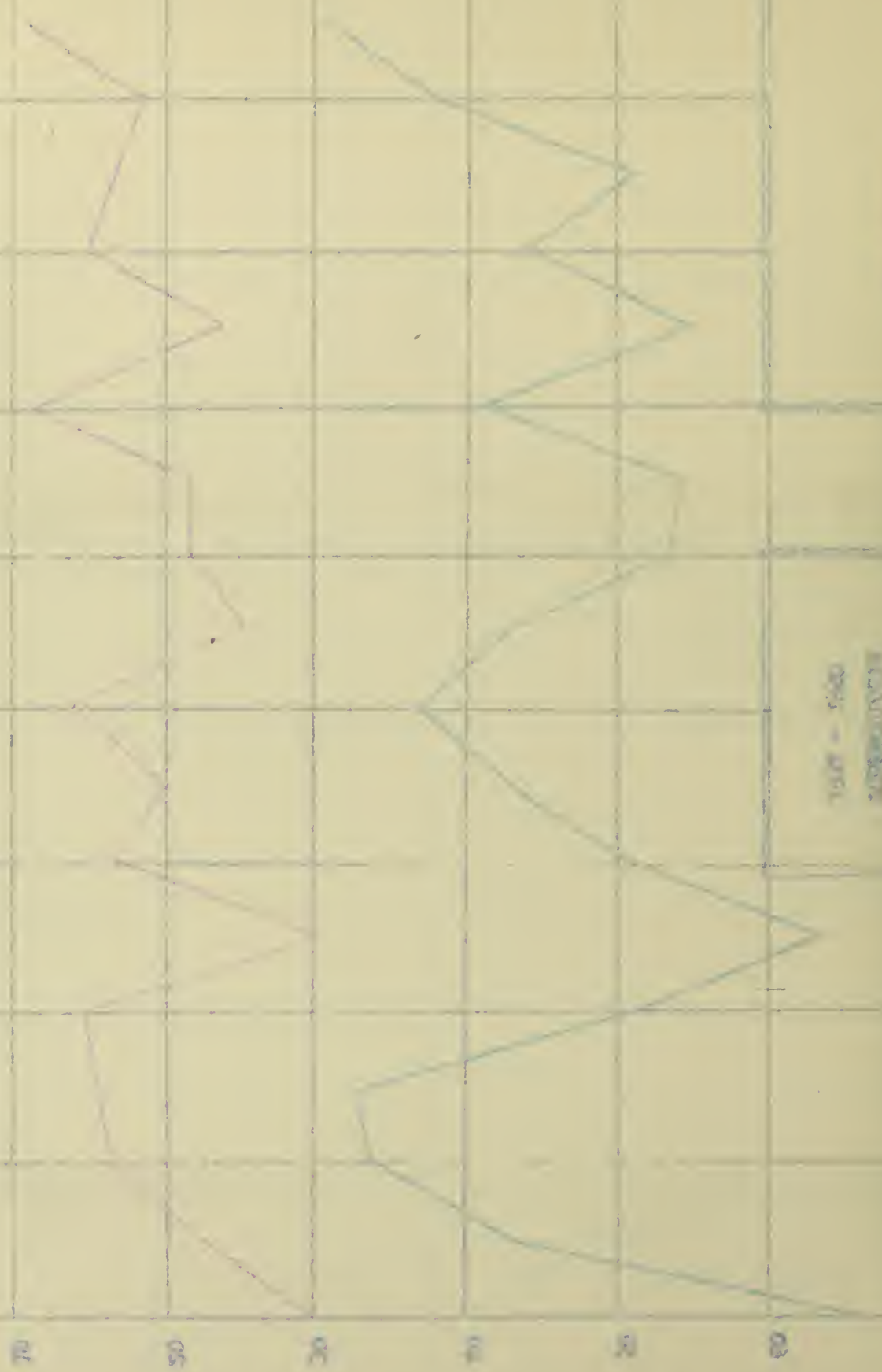
Legend  
 1. 1980-1985  
 2. 1986-1990  
 3. 1991-1995  
 4. 1996-2000  
 5. 2001-2005  
 6. 2006-2010  
 7. 2011-2015  
 8. 2016-2020  
 9. 2021-2025  
 10. 2026-2030





Location of  
Landing (km)  
approximate bearing of 1000000  
(meters) (km)

1000000  
0000 - 0000





Public Health Department,

Town Hall,

Maesteg.

July, 1952.

To the Chairman and Members of the Maesteg Urban  
District Council.

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Mr. Chairman, Ladies & Gentlemen,

I herewith submit for your consideration my Report upon the Vital Statistics and Sanitary circumstances of your Urban Area for the year 1951.

Since my appointment on 1st November, 1948, the Health Department has pursued and partially or wholly attained the following objects :-

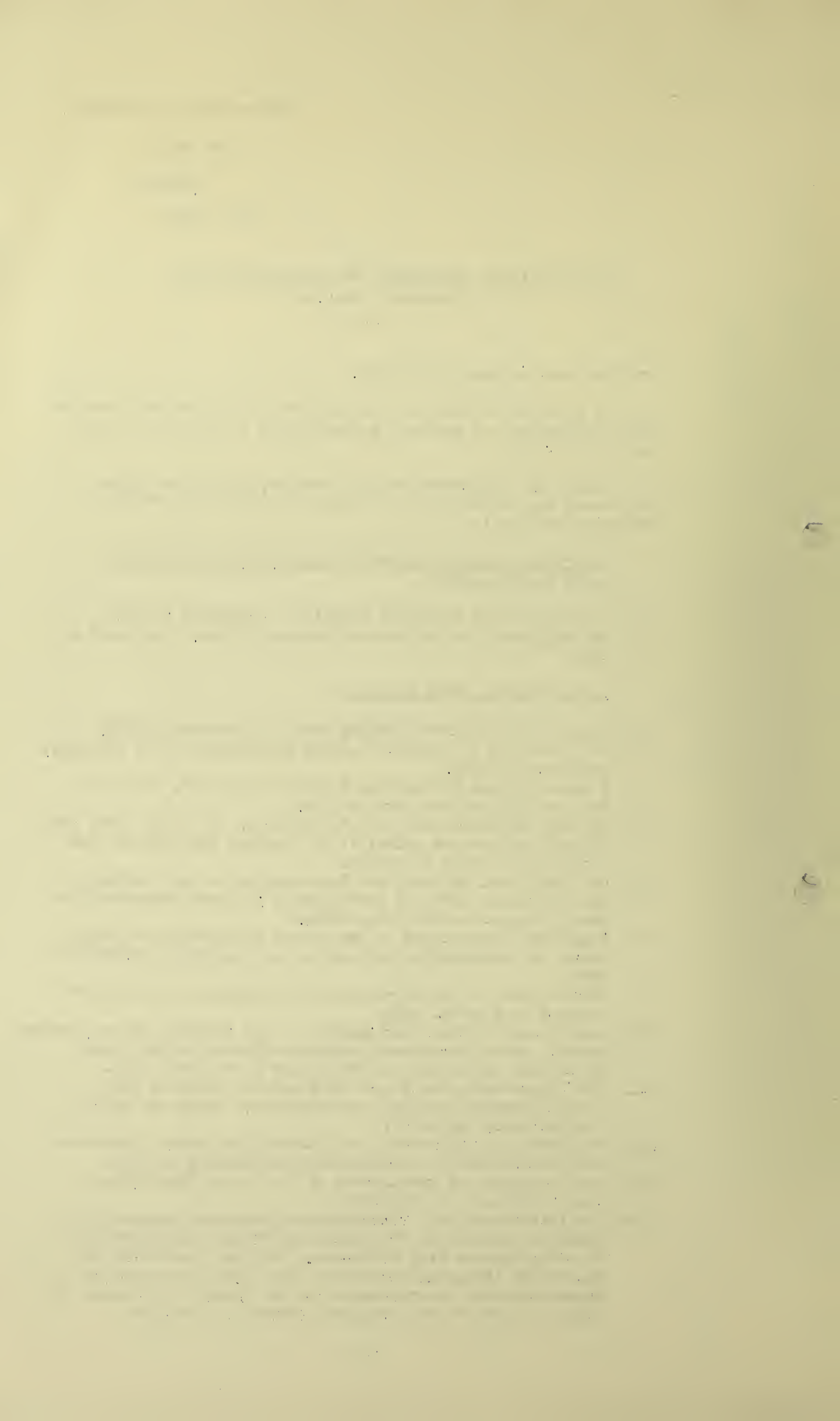
Before the complete take-over by the Regional Hospital Board in July, 1949

- (1) Painting of the Isolation Hospital. Completed in 1949.
- (2) New Equipment for the Maesteg Maternity Home. Completed in 1949.

In the Maesteg Urban District

- (3) Closure of the Common Lodging House in September, 1949.
- (4) The provision of adequate Washing Facilities in all Bakeries. Completed in 1949.
- (5) A 2-yearly Mass Radiography for the Population. One was held in 1949 and the next in 1951.
- (6) The regular Re-housing of T.B. Patients. In July, 1950, the Council adopted the principle to re-house one patient from each Ward in every 64 houses.
- (7) The Additional Building and Improvements to the Maesteg Slaughterhouse with the provision of Sanitary Accommodation. Small items are still outstanding.
- (8) Suggested Improvements to the Caerau Pasteurization Plant which, on the Owner's initiative, was completely re-built in 1949.
- (9) Introduction of New Byo-Laws for Food Hygiene; these were adopted in January, 1950.
- (10) Improvement in the Water Supply and the Painting of the Maesteg Market. Some improvement has been effected in the Water Supply and the Market was re-painted in the year 1952.
- (11) The Improvement with regard to Washing Facilities and General Hygiene in Cafes and Restaurants which are now in a satisfactory standard.
- (12) The Provision of Dust-bins to Maesteg Dwellings. Dust-bins have been supplied to some of the new Housing Estates.
- (13) The Extension and Re-building of the Sewage Works which are, at present, in progress.
- (14) The Introduction of a Tuberculosis Re-housing Register in which all Applicants for Houses suffering from Tuberculosis are administered from day-to-day. All new applicants are visited by the M.O.H. personally who thereafter makes his recommendations for re-housing to the Council and copies of which are sent to the Divisional Office in Bridgend.





With regard to the Vital Statistics, the year 1951 has shown a favourable picture. The Graph of Total Deaths from the Principle Infectious Diseases shows a fall. The Deaths due to Infantile Diarrhoea and those due to Measles remained stationary.

No cases of Diphtheria or Poliomyelitis have been notified in the Urban District during the Year.

Tuberculosis shows an even more favourable picture. The Graphs of both Notifications and Deaths have shown the lowest level since the year 1934. Tuberculosis Re-housing is, however, still unsatisfactory, only 3 cases of Tuberculosis having been re-housed in 1951. If this rate were continued, it would take about 6 years to clear the Waiting List for Pulmonary Tuberculosis of the beginning of 1952, irrespective of other forms of Tuberculosis and new names of Pulmonary Tuberculosis having been added since.

Of the Graph for the Vital Statistics of the Urban District we note a continuing descending line for Infantile Mortality, a fairly steep increase in the Birth-rate, a fall in the Deaths at All Ages, but a slight fall in the General Population. The drop in the General Death-rate, however small, is significant due to the steep increase in the population of the Aged, now, and in future years. In Maesteg this fall may also be partly due to the slight decline in population.

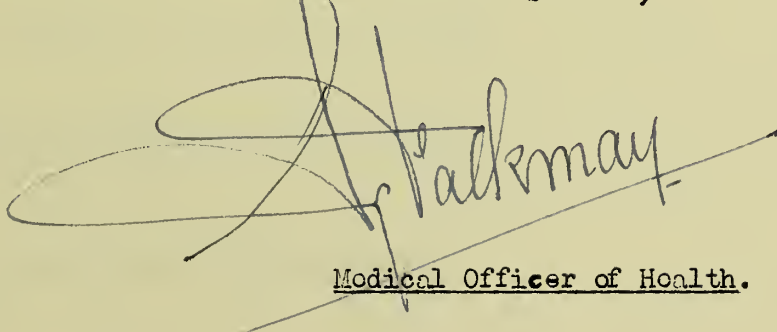
Of the 19 Infantile Deaths, 7 were due to Prematurity, 4 due to Pneumonia and Broncho-pneumonia and 1 due to Acute Enteritis. The proportion of Prematurity is much larger than in the year 1950 while the deaths due to Pneumonia are much less. Without these losses the Mortality would have been reduced considerably.

In general, the Year has closed on an optimistic note and it is the aim of our Department and of the Medical Officer of Health to continue these improvements in every possible way.

Personally signed copies only, constitute the original, unamended Report.

I am, Ladies & Gentlemen,

Your obedient Servant,

A large, stylized handwritten signature in dark ink, appearing to read 'J. Parkman', is written over a horizontal line. The signature is fluid and cursive, with a large loop at the end.

Medical Officer of Health.

THE UNIVERSITY OF CHICAGO  
DEPARTMENT OF THE HISTORY OF ARTS  
AND ARCHITECTURE  
CHICAGO, ILLINOIS 60637

OFFICE OF THE DEAN  
1100 EAST 58TH STREET  
CHICAGO, ILLINOIS 60637

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# GENERAL STATISTICS

Area in Acres	.....	.....	.....	6,709
Population 1951 (Estimated)	.....	.....	.....	23,010
" 1891 Census	.....	.....	.....	9,471
" 1901 "	.....	.....	.....	15,015
" 1911 "	.....	.....	.....	24,977
" 1921 "	.....	.....	.....	28,960
" 1931 "	.....	.....	.....	25,552
" 1951 "	.....	.....	.....	23,124
Rateable Value of 1951	.....	.....	.....	£78,631
Sum represented by a Penny Rate	.....	.....	.....	£293

## Per 1,000 Live Persons

Birth Rate for 1951	.....	.....	20.69
Average Birth Rate for 10 previous years	.....	.....	20.70
Death Rate (from all causes) for 1951	.....	.....	13.21
Average Death Rate for 10 previous years	.....	.....	12.54
Death Rate from Pulmonary Tuberculosis for 1951	.....	.....	0.40
Average Death Rate from Pulmonary Tuberculosis for 10 previous years	.....	.....	0.50
Death Rate from other forms of Tuberculosis for 1951	.....	.....	0.00
Infantile Mortality Rate for 1951.....	.....	.....	39.92
Average Infantile Mortality Rate for 10 previous years	.....	.....	66.3

# THE HISTORY OF THE

REIGN OF

CHARLES THE FIRST

BY JOHN BURNET

IN TWO VOLUMES

VOLUME THE FIRST

THE SECOND PART

OF THE HISTORY

OF THE REIGN OF

CHARLES THE FIRST

BY JOHN BURNET

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OF THE REIGN OF

CHARLES THE FIRST



# EXTRACTS FROM VITAL STATISTICS

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## Births :-

				Males	Females	Total
Legitimate	...	...	...	226	229	455
Illegitimate	..	...	...	11	10	21
Still-Births	..	...	...	7	4	11
Birth Rate	...	...	...		20.69	
Birth Rate, England & Wales					15.5	

## Deaths :-

Males	-	171	Females	-	133	Total	-	304
Death-Rate	...				13.21			
Death-Rate, England & Wales	...				12.5			

## Deaths from Puerperal Causes :-

From Puerperal Infections	...	...	...	...	...	0
Other Maternal Infections	...	...	...	...	...	1
Rate per 1,000 total (live and still) births	...	...	...	...	...	2.26
Rate for England & Wales	...	...	...	...	...	0.79

## Deaths of Infants under One year of Age :-

Legitimate	...	...	...	...	...	...	...	16
Illegitimate	...	...	...	...	...	...	...	3
Total	...	...	...	...	...	...	...	19
Rate per 1,000 Live Births	...	...	...	...	...	...	...	39.92

## Deaths of Infants under Four Weeks of Age :-

Legitimate	...	...	...	...	...	...	...	9
Illegitimate	...	...	...	...	...	...	...	3
Total	...	...	...	...	...	...	...	12
Rate per 1,000 Live Births	...	...	...	...	...	...	...	25.21

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Deaths from Diarrhoea	...	...	...	...	...	2
Deaths from Measles, all ages	...	...	...	...	...	1
Deaths from Whooping Cough, all ages	...	...	...	...	...	0



SUMMARY OF THE CHIEF CAUSES OF DEATH AT ALL AGES AND  
THEIR RATES FOR THE YEAR 1951  
(Civilian and Non-Civilian)

		Number of Deaths			Rate per 1,000
		M	F	Total	
1.	Tuberculosis, respiratory ...	7	4	11	0.40
2.	Tuberculosis, other forms ...	0	0	0	0.00
3.	Syphilitic Disease ...	0	0	0	0.00
4.	Diphtheria ...	0	0	0	0.00
5.	Whooping Cough ...	0	0	0	0.00
6.	Meningococcal Infections ...	0	0	0	0.00
7.	Acute Poliomyelitis ...	0	0	0	0.00
8.	Measles ...	1	0	1	0.04
9.	Other infective & parasitic diseases ...	2	0	2	0.08
10.	Malignant Neoplasm, stomach ...	12	4	16	0.60
11.	Malignant Neoplasm, lung, bronchus ...	5	0	5	0.21
12.	Malignant Neoplasm, breast ...	0	2	2	0.08
13.	Malignant Neoplasm, uterus ...	0	1	1	0.04
14.	Other Malignant & Lymphatic Neoplasms ...	12	6	18	0.70
15.	Leukaemia, Aleukaemia ...	0	1	1	0.04
16.	Diabetes ...	2	6	8	0.30
17.	Vascular lesions of nervous system ...	13	17	30	1.03
18.	Coronary disease, Angina ...	12	11	23	0.90
19.	Hypertension with heart disease ...	0	0	0	0.00
20.	Other heart disease ...	40	32	72	3.01
21.	Other circulatory disease ...	0	0	0	0.00
22.	Influenza ...	5	7	12	0.50
23.	Pneumonia ...	6	3	9	0.30
24.	Bronchitis ...	11	8	19	0.80
25.	Other diseases of respiratory system ...	11	0	11	0.40
26.	Ulcer of stomach & duodenum ...	1	0	1	0.04
27.	Gastritis, Enteritis & Diarrhoea ...	1	1	2	0.08
28.	Nephritis & Nephrosis ...	1	3	4	0.10
29.	Hyperplasia of prostate ...	3	0	3	0.10
30.	Pregnancy, childbirth, abortion ...	0	1	1	0.04
31.	Congenital malformations ...	3	0	3	0.10
32.	Other defined & ill-defined diseases ...	17	19	36	1.05
33.	Motor vehicle accidents ...	2	2	4	0.10
34.	All other accidents ...	4	5	9	0.30
35.	Suicide ...	0	0	0	0.00
36.	Homicide & operations of war ...	0	0	0	0.00

ALL CAUSES :- Males ... 171

Females ... 133 Total ... 304

Rate per 1,000 ... 13.21





GLAMORGAN (ADMINISTRATIVE COUNTY) - VITAL STATISTICS, 1951

	Estimated Population 1951	BIRTHS		DEATHS		INFANT MORTALITY		NEO NATAL MORTALITY	
		Number of Births	Rate per 1,000 Population	Number of Deaths	Rate per 1,000 Population	Deaths under 1 year	Rate per 1,000 Live Births	Deaths under 4 weeks	Rate per 1,000 Live Births
England and Wales		...	...	...	...	...	...	...	...
Administrative County	732,100	11,946	15.50	10,091	12.50	441	29.60	274	18.80
Urban Districts	531,900	8,877	16.32	7,687	13.78	350	36.92	219	22.94
Rural Districts	200,200	3,069	16.69	2,404	14.45	91	39.43	55	24.67
Health Division.		...	15.33	...	12.01	...	29.65	...	17.92
Constituent Districts.									
Aberdare and	40,710	608	14.93	751	18.45	33	54.28	23	37.83
Mountain Ash	31,360	551	17.57	465	14.83	23	41.74	13	23.59
Gaorphilly and	35,380	748	21.14	458	12.95	27	36.10	18	24.06
Golligaor	36,110	631	17.47	482	13.35	18	28.53	11	17.43
Mid-Glamorgan	13,530	227	16.78	162	11.97	8	35.24	4	17.62
	23,010	476	20.69	304	13.21	19	39.92	12	25.21
Maesteg Urban	22,480	356	15.84	313	13.92	9	25.28	4	11.24
Ogmore & Garw Urban	9,388	131	13.95	164	17.47	1	7.63	-	-
Porthcawl Urban	33,820	564	16.68	359	10.62	25	44.33	17	30.14
Penybont Rural	31,850	454	14.25	445	13.97	22	48.46	17	37.44
Neath M.B.	41,430	637	15.38	536	12.94	15	23.55	6	9.42
Neath Rural	38,460	661	17.19	575	14.95	26	39.33	14	21.18
Pontypridd and	25,440	482	18.95	295	11.60	16	33.20	10	20.75
Llantrisant	9,343	220	23.55	122	13.06	9	40.91	7	31.82
Port Talbot and	43,970	719	16.35	545	12.39	22	30.60	12	16.69
Glyncoirwg	40,700	702	17.25	478	11.74	24	34.19	15	21.37
South East	35,730	454	12.71	457	12.79	8	17.62	5	11.01
Glamorgan	1,069	14	13.10	13	12.16	1	71.43	1	71.43
	19,850	303	15.26	148	7.46	9	29.70	8	26.40
Pennarth Urban	18,310	300	16.38	263	14.36	8	26.67	5	16.67
Gower Rural	11,590	201	17.34	151	13.03	5	24.88	2	9.95
Llwehwr Urban	25,530	375	14.69	379	14.85	12	32.00	9	24.00
Pontardawe Rural	32,340	428	13.23	458	14.16	13	30.37	7	16.36
West Glamorgan									
Rhondda	110,700	1,704	15.39	1,768	15.97	88	51.64	54	31.69





Birth-Rates, Death-Rates, Analysis of Mortality, Maternal Mortality and Case Rates for certain Infectious Diseases in the year 1951.  
Provisional figures based on Weekly and Quarterly Returns of the Registrar-General (England and Wales).

	England and Wales	126 County Boroughs and Great Towns (including London)	148 Smaller Towns (Resident Population 25,000-50,000 at 1931 Census)	London Administ- trative County
	. Rates per 1,000 Home Population			
<u>BIRTHS</u>				
Live Births	15.5	17.3	16.7	17.8
Still Births	0.36	0.45	0.38	0.37
<u>DEATHS</u>				
All Causes	12.5 +	13.4	12.5	13.1
Typhoid and Paratyphoid	0.00	0.00	0.00	-
Whooping Cough	0.01	0.01	0.01	00.01
Diphtheria	0.00	0.00	0.00	0.00
Tuberculosis	0.31	0.37	0.31	0.38
Influenza	0.38	0.36	0.38	0.23
Smallpox	0.00	0.00	0.00	-
Acute Poliomyelitis (including Poliocencephalitis)	0.00	0.01	0.01	0.00
Pneumonia	0.61	0.65	0.63	0.61
	Rates per 1,000 Live Births			
All causes under 1 Year of Age	29.6 *	33.9	27.6	26.4
Enteritis and Diarrhoea under 2 years of Age	1.4	1.6	1.0	0.7

. A dash (-) signifies that there were no deaths

\* Per 1,000 related births

+ Rates per 1,000 Total population



	England and Wales	126 County Boroughs and Great Towns (including London)	148 Smaller Towns (Resident Population 25,000-50,000 at 1931 Census)	London Administ- rative County
Rates per 1,000 Population				
<u>NOTIFICATIONS</u> (Corrected) :-				
Typhoid Fever	0.00	0.00	0.00	0.01
Paratyphoid Fever	0.02	0.03	0.02	0.01
Meningococcal Infection	0.03	0.04	0.03	0.03
Scarlet Fever	1.11	1.20	1.20	1.10
Whooping Cough	3.87	3.62	4.00	3.11
Diphtheria	0.02	0.02	0.03	0.01
Erysipelas	0.14	0.15	0.12	0.15
Smallpox	0.00	0.00	0.00	-
Measles	14.07	13.93	14.82	14.64
Pneumonia	0.99	1.04	0.96	0.72
Acute Poliomyelitis (including Polioencephalitis)				
Paralytic	0.03	0.03	0.03	0.02
Non-Paralytic	0.02	0.02	0.03	0.02
Food Poisoning	0.13	0.15	0.08	0.23

Rates per 1,000 Total Births (Live and Still) :-

(a) Notifications (corrected) :

Puerperal Fever and Pyrexia	10.66	13.77	8.08	14.90
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(b) Maternal Mortality in England and Wales :

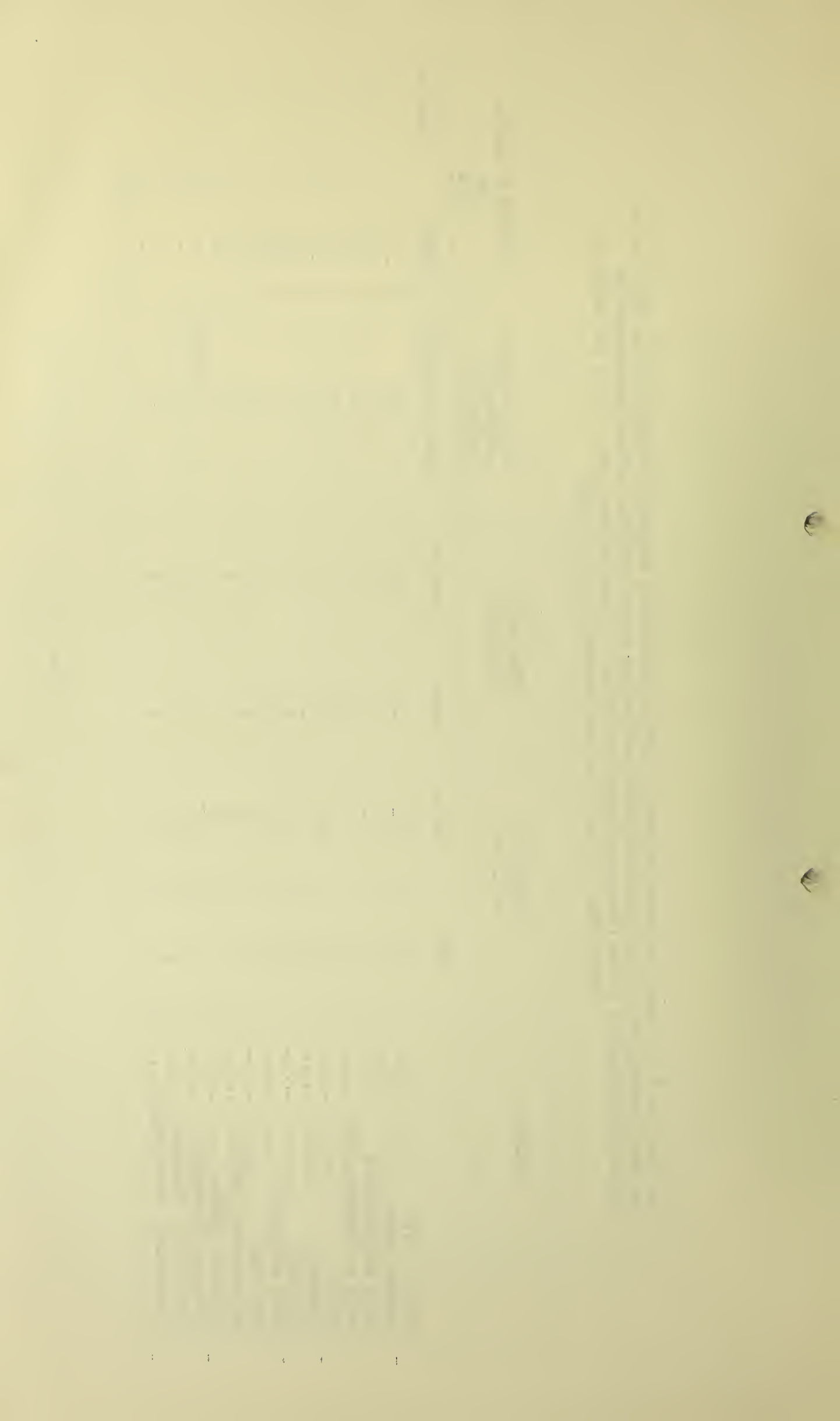
Intermediate List No. and Cause	Number of Deaths	Rates per 1,000 Total (Live & Still) Births	Rates per million women aged 15-44
A 115 (Sepsis of pregnancy, childbirth and the puerperium	70	0.10	
(Abortion with toxæmia Other toxæmias of	3	0.00	0
A 116 (pregnancy and the puerperium	167	0.24	
A 117 (Haemorrhage of pregnancy and childbirth	91	0.13	
A 118 (Abortion without mention of sepsis or toxæmia	37	0.05	4
A 119 (Abortion with sepsis	66	0.09	7
A 120 (Other complications of pregnancy, childbirth and the puerperium	125	0.18	





The following Table shows the number of cases of Infectious Diseases originally notified during 1951, and of the final numbers after corrections subsequently made either by the notifying Medical Practitioner or Medical Superintendent of the Infectious Diseases Hospital. A column is also given showing the number of deaths from certain Infectious Diseases during the year.

DISEASE	ORIGINALLY NOTIFIED		AFTER FINAL CORRECTION		TOTAL FOR 1951 AFTER FINAL CORRECTION	NUMBER OF DEATHS IN 1951	
	Males	Females	Males	Females		Males	Females
SCARLET FEVER .....	5	13	5	13	18	-	-
WHOOPING COUGH .....	16	17	16	17	33	-	-
ACUTE POLIOMYELITIS .....	-	-	-	-	-	-	-
ACUTE POLIOENCEPHALITIS .....	-	-	-	-	-	-	-
MEASLES .....	14	14	14	14	28	1	-
DIPHTHERIA .....	1	-	-	-	-	-	-
DYSENTERY .....	3	-	1	-	1	-	-
ACUTE PNEUMONIA .....	51	31	49	31	80	6	-
ERYSIPELAS .....	2	3	2	3	5	-	3
MENINGOCOCCAL INFECTION .....	4	2	1	1	2	-	-
PUERPERAL PYREXIA ...	-	7	-	7	7 (Females)	-	-
OPHTHALMIA NEONATORUM .....	-	-	-	-	-	-	-
TUBERCULOSIS, PULMONARY .....	8	16	8	16	24	7	4
TUBERCULOSIS, OTHER FORMS .....	3	4	3	4	7	-	-

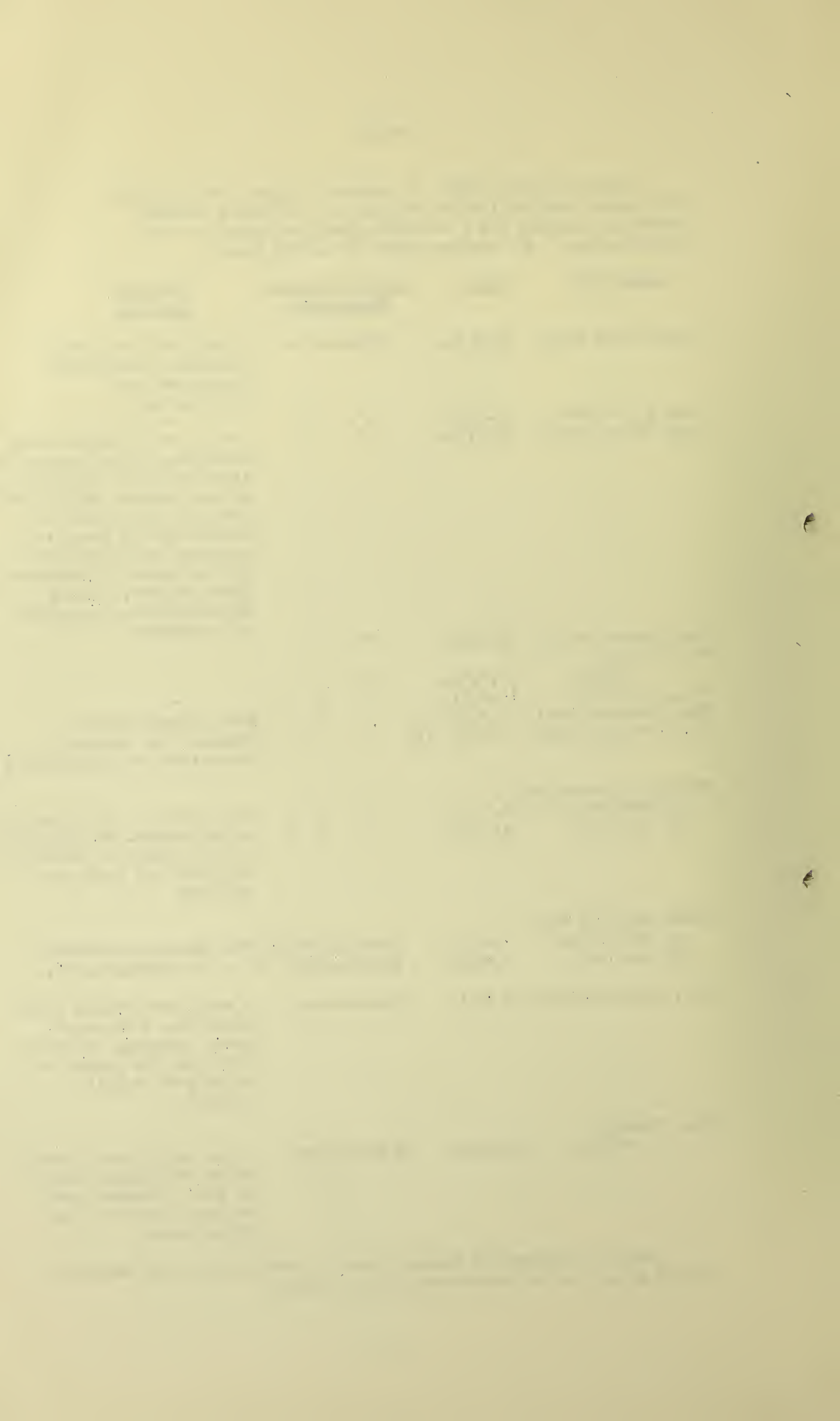


# WATER

During the year 1951, 24 samples of water were taken for quantitative and qualitative analysis by the County Analyst. 3 chemical analyses and 1 bacteriological examination were unsatisfactory. All samples taken are listed below :-

<u>Taken from</u>	<u>Date</u>	<u>Bacteriological Examination</u>	<u>Chemical Analysis</u>
Tap, Talbot Street	20.3.51.	Satisfactory	A very soft acid water. Chemical and physical characters are satisfactory.
Tap, Tonna Road	20.3.51.	" "	-
Tap, Picton Street	20.3.51.	" "	A very soft alkaline water containing a fair amount of iron and zinc. Sample is of good organic quality but physical characters are unsatisfactory owing to presence and subsequent precipitation of dissolved iron and zinc, causing discolouration, turbidity and sediment.
Tap, Church Street	20.3.51.	" "	-
Tap, Council Offices	17.4.51.	" "	-
Tap, Neath Road	17.4.51.	" "	-
Tap, Bridgend Road	17.4.51. (a)	" " )	Soft neutral waters.
Tap, Bridgend Road	17.4.51. (b)	" " )	Chemical and physical characters are satisfactory.
Maesteg Swimming Pool			
(a) Shallow End	31.7.51.	" " )	The physical characters are satisfactory. The chlorine dosage should be increased by about 0.2 parts per million.
(b) Deep End	31.7.51.	" " )	
Garth Swimming Pool			
(a) Shallow End	6.8.51.	Unsatisfactory)	The physical characters are unsatisfactory.
(b) Deep End	6.8.51.	Satisfactory )	
Tap, Maesteg Market	24.8.51.	Satisfactory	A very soft neutral water containing a trace of zinc. Chemical analysis indicates the sample to be of good organic quality.
Tap, Council Offices	24.8.51.	Satisfactory	A very soft faintly acid water containing a trace of zinc. Chemical and physical characters are satisfactory.

Copies of Laboratory Reports upon all examinations were forwarded to the Manager of the Mid-Glamorgan Water Board.



On the 19th March, 1951 the Mid-Glamorgan Water Board was approached by the Surveyor to the Maesteg Urban District Council, to express the Council's fear that the houses now in course of erection at the Turberville Housing Site and properties at higher levels in Cemetery Road would be without a supply of water when completed in August, 1951 and thus have to remain un-tenanted.

In reply the Manager of the Mid-Glamorgan Water Board reported that the plans of the Turberville Site were first submitted on 10th June, 1949 and on the 13th June, 1949 the Council were informed that under the existing scheme of distribution the site could not be supplied with water. Even when the High Level Scheme was completed the supply to the site would not be adequate due to the distance of the site from the Main Trunk, the small diameter of the existing Mains and the state of corrosion in which they were found. The High Level Scheme was completed in October, 1949 and since, the Park Housing Site and the High Level Properties in the vicinity had been adequately supplied. In the Winter of 1949 tests were made to ascertain whether the Turberville Site and Cemetery Road on the Eastern side of the Valley could be supplied from the new Reservoir at Brynmawr without subjecting the remainder of the District to the high pressure of that supply. In May, 1950, the tests had to be declared unsuccessful and a new 1,200 yards, 6-inch Main was recommended from the 12-inch Main at Station Street to Duke Street. The consent of the Welsh Board of Health was received on 20th October, 1950, but after enquiries it was found that the pipes could not be delivered until July, 1951. The laying of the 1,050 yards 6-inch Main was completed in September, 1951 and, as a result, an adequate supply of water could be maintained on the highest points of Turberville Site for Duke Street and for Cemetery Road.

The following additional works were carried out in the year 1951 :-

(a) Turberville Housing Site :

560 yards of 4-inch C.I. Mains.  
1,204 yards of 3-inch C.I. Mains.

(b) School Road and Salisbury Road :  
(Building by Private Enterprise)

96 yards of 3-inch C.I. Mains.

When repairing the Heating Boiler of the Nantyffyllon Pumping Station at the end of the year it was found impossible to get suitable firebars as the Boiler was of obsolete pattern. The delivery of new boilers being very difficult, viz : 18-24 months, it was fortunate that a firm in Bridgend had one in stock so that a new Boiler could be ordered.

All houses in the Maesteg District are supplied from the Public Water Mains with the exception of 32 which are mainly outlying farms and cottages far away from the Public Water Mains and are still supplied by Stand-pipes.



THE HISTORY OF THE  
CITY OF BOSTON  
FROM THE FIRST SETTLEMENT  
TO THE PRESENT TIME  
IN TWO VOLUMES  
BY NATHANIEL BENTLEY  
OF THE BARR

THE FIRST VOLUME  
CONTAINING THE HISTORY  
FROM THE FIRST SETTLEMENT  
TO THE YEAR 1780  
LONDON: PRINTED BY J. JOHNSON, ST. PAULS CHURCH-YARD, 1787

THE SECOND VOLUME  
CONTAINING THE HISTORY  
FROM THE YEAR 1780  
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## SWIMMING BATHS

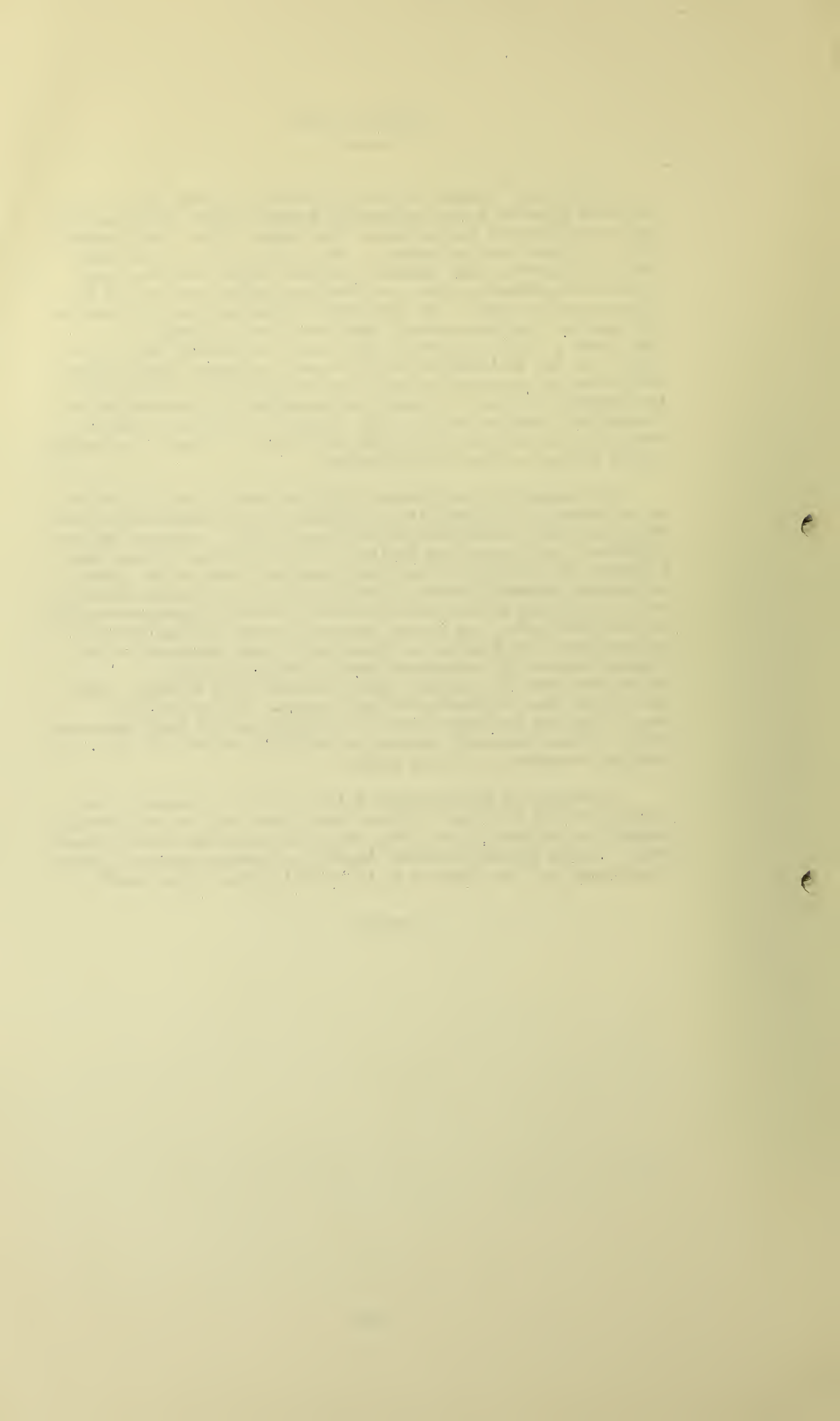
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During the swimming season, 2 samples of water were collected from the Garth and Maesteg Swimming Baths and submitted for bacteriological examination. The sample of the Garth Swimming Bath was found unsatisfactory at the shallow end. Two samples were also submitted for Chemical Analysis while again the water of the Garth Swimming Bath was found unsatisfactory both at the deep and shallow ends. The Surveyor's Department was informed of the results. An inspection of the Garth Pool was made on 10th August, 1951 to ascertain the causes of impurity and it was found that due to inexperience of a newly-appointed employee the filtration of the water had not been going smoothly and much of the impurity was due to failure in discarding the reverse-flow of the Filter. This matter was duly attended to and the water in the Pool which had been of a very dirty, green colour, subsequently turned out to be clear and wholesome.

The Report of the Director of Water Examination for London on the spread of Poliomyelitis by public water supplies indicated that the virus was inactivated in 10 minutes by a residual of free chlorine of 0.05 parts per million. It was for this reason that I thought it advisable to have Log Books kept both in the Garth and Maesteg Swimming Baths in order to have a continuous record of the chlorination of the water and also to have a Chlorine-tester in use for both pools. As in the previous 3 years the incidence of Poliomyelitis in Maesteg had risen and a heavy outbreak of the disease occurred in the Swansea area in the year 1950, a Chlorine-tester for the Garth Bath was asked for in July, 1950, but has not been available for that season. On the 26th of June, 1951, the Chlorine-tester was received by the Garth Swimming Bath so that both pools can now be regularly tested and the findings recorded in the Log Books.

Although the Mid-Glamorgan Water contains a residual free Chlorine of 0.2 parts per million this figure will be considerably reduced in polluted waters. The water for the Garth Pool is pumped from a stream joining the River Llynfi just behind the pool, while the Maesteg Pool is supplied by the Mid-Glamorgan Water Board.

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# ANNUAL RAINFALL

The total rainfall for the year, as registered at the Council's Welfare Park, was 81.88 inches.

The following Table gives the rainfall record for districts in the Area of the Mid-Glamorgan Water Board during the year ended 31st December, 1951.

MONTH	MERTHYR -MAWR	BRIDGEND	SCHWILL	LLANLARAN	ST. ATHAN	PWLLHY	MAESTEG	BLACKHILL	OGMORRE VALE	PONT-Y- CYMMER	AVERAGE ANNUAL RAINFALL :	
Jan	5.72	5.70	5.54	7.40	3.99	5.63	9.89	7.91	12.64	10.13	Southern Area Gols 1-6	51.09
Feb	4.30	3.96	4.07	5.56	3.99	4.69	6.57	5.49	8.57	7.64	Northern Area Gols 7-10	87.20
Mar	5.64	5.11	5.32	5.63	4.81	5.64	7.77	6.65	9.98	8.10		51.09
Apr	4.15	4.07	3.78	4.72	3.92	4.44	6.73	5.39	8.37	8.14		42.26
May	3.17	2.50	2.55	2.76	2.48	2.79	3.38	3.44	3.50	3.59		54.44
June	0.57	0.72	0.58	0.85	0.30	0.55	2.23	1.19	3.03	2.28		47.94
July	1.54	1.79	1.75	2.23	0.88	1.95	2.42	1.62	2.35	2.59		81.82
Aug	7.13	6.71	5.90	7.69	2.28	5.11	14.56	4.57	13.58	13.10		
Sept	4.33	4.30	4.03	5.25	3.14	4.05	7.08	7.53	8.61	8.16		
Oct	1.84	2.07	1.78	2.00	2.15	2.13	1.49	1.49	2.07	1.90		
Nov	8.55	7.88	7.70	8.91	6.02	7.67	12.78	10.12	15.43	13.75		
Dec	3.04	3.64	3.69	3.92	3.47	3.53	6.98	4.58	9.89	8.03		
TOTALS 1951	49.98	48.45	46.69	56.92	37.43	48.18	81.88	59.98	98.02	87.39		

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## HOUSING

Number of new houses erected during the year 1951 :-

By the Local Authority : 28

By other persons or bodies : 12

Total number of houses owned by the Local Authority :-

(a) Under the Housing Acts 525

(b) Other Powers 12

For the third year in succession the Recommendations for the Selection of Tenants, contained in the Third Report of the Housing Management Committee appointed by the Minister of Health under Section 135 of the Housing Act, 1936, have not been considered (Circular Welsh Board of Health 31/49 of 11th April, 1949). The desirability of a complete review of the present points system was already mentioned in the Treasurer's Report of 19th January, 1950 and in a Memorandum of the Medical Officer of Health on 6th October, 1950.

On the 24th May, 1951 a Sub-Committee was convened in order to discuss the Recommendations but as no Resolution of this Sub-Committee appeared in the Minutes of the Council the position with regard to the Selection of Tenants can be considered as unchanged. Points for Ill-Health are given by the Rent Collector and not by the Medical Officer of Health and it becomes at once obvious that the influence of bad sanitary circumstances on the vast range of diseases and on the various stages of a particular disease cannot possibly be assessed by a person without medical training. The points awarded for disease are therefore arbitrary and involve necessarily an element of injustice to the community. It would be fairer to the Public if, with the exception of Tuberculosis, no points for disease were awarded at all, rather than the way in which it is done at present by people who are unqualified to do so. With Pulmonary Tuberculosis which is a chronic infectious disease of long duration the maximum points should be given for "open" cases in order to "prevent the spread of Infection and removing conditions favourable to Infection" (Tuberculosis Regulations, 1930, Section 11, paragraph 1) - substituted by the Tuberculosis Regulations, 1952 on 1st May, 1952.

Re-housing applications are not dealt with in Committee as advised in Section 42, part 1 of the Recommendations, while the Selection of Tenants is done by the Ward Members of the Urban District Council belonging to the Ward in which the Applicant resides.

In the Borough of Port Talbot the Points-List is published and therefore available to the General Public. This is an extremely fair way of dealing with re-housing matters and in complete agreement with the Recommendations for the Selection of Tenants - Section 28 - "Impartiality." This system has not been adopted by the Maesteg Urban District Council where complaints with regards to re-housing matters are perennial and have reached occasionally the Welsh Board of Health and the County Medical Officer. As far as can be assessed the greatest objection of Applicants against the present system is "that they do not know where they are" and as the housing system of the Borough of Port Talbot has proved itself satisfactory, it could be adopted by the Maesteg Urban District Council.



The assessment of points for Sanitary Defects and Overcrowding are done by the Treasurer's Department so that the Sanitary Inspectors and the Medical Officer of Health have never been given an active part in Re-Housing matters.

During the year 1951 the building of the Turberville Housing Estate of 222 houses has been started and at the end of the year 28 houses had been completed.

With regard to the condition of the existing houses, little change has taken place during the year 1951. As already pointed out, the great age of many houses in the District requires an ever increasing amount of repair, sometimes beyond the financial capacity of their owners. Owners who do not comply with the Official Notices served upon them under the various public Health and Housing Acts are brought before a Court of Summary Jurisdiction with little delay. The steep increase in wages and prices makes it more and more difficult to render houses fit for human habitation "at a reasonable expense" with the result that if Section 11 of the Housing Act, 1936 were applied rigidly an increasing amount of houses will have to be condemned.

Rent arrears have become a growing problem in the District and compelled the Urban District Council to pursue a more rigid policy.

Up to the end of the year 1951, 634 applications for new houses in the Maesteg Urban District have been received so that the prospect with regard to Overcrowding will undergo little change.

Circular 73/51 (Wales), Ministry of Housing and Local Government, gives Local Authorities power with the consent of the Minister to sell houses which they have themselves provided under the Housing Acts while the Department will be ready to sanction loans to enable Local Authorities to exercise their statutory powers under the Small Dwellings Acquisition Acts and the Housing Acts.

Eleven loans have been granted under these Acts.

As the Cost of Repair for Council Houses has put an increasing burden on the Urban District as it has done on Private Owners, it is to be hoped that the encouragement of House Ownership will solve this financial problem to some extent and will induce the new Owners of Council Houses to keep their property in a good state of repair.

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## COMMON LODGING HOUSE

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In my Annual Report for the year 1948 the Department pointed out that the conditions in the premises from a structural and sanitary point of view were appalling; that they were unfit for human habitation since 1941 and that there was gross overcrowding in the apartments let to the three families inhabiting the Lodging House, together with an average of 15 lodgers.

The Common Lodging House had not been registered since July 22nd, 1947 and had no full-time Keeper. My predecessor the late Dr. Andor, in his Report of the 29th August, 1947, wrote :-

"Despite the Council's Minute No. 538 of the 22nd July, 1947, where an application for Licence was refused, this Lodging House is still functioning. Further action should now be considered. "

and in his Report of 17th October, 1947 :-

"This Building, which the Council refused to register as a Common Lodging House is still carrying out the functions of a Common Lodging House and thus not conforming with -

Section 236 of the Public Health Act, 1936							
" 237	"	"	"	"	"	"	"
" 238	"	"	"	"	"	"	"
" 241	"	"	"	"	"	"	"

Further, this house, functioning as a Common Lodging House, is not conforming to the Council's Byelaws on Common Lodging Houses.

I now suggest to the Council that legal action under Sections 246 and 247 of the Public Health Act, 1936, be now taken.

Whilst awaiting the results of this action, it is also suggested that the Council also take action under Sections 83 and 84 of the Public Health Act, 1936. "

The Sanitary Inspector in his Report of 5th June, 1948 recommended -

"In order that I may reach some finality in this matter I unhesitatingly recommend the following :

(1) That the Owner be proceeded against forthwith for using unregistered premises as a Common Lodging House.

(2) That alternative accommodation be provided by the Council for the under-mentioned families now housed at the Common Lodging House, followed by immediate action to close the premises :

Family No. 1	-	Mrs. R. Barnes and Family.
" " 2	-	Mr. Richard Hayes and Family.
" " 3	-	Mr. R.V. Boswell and Family. "

In my Own Report of 2nd December, 1949 I wrote :

"The remarkable feat has been performed that in spite of the fact that the Lodging House was not registered it functioned until August, 1949, a period of over two years while the fine





for non-registration is £5 plus £2 for every day following non-registration. Will the submission of plans be "deferred" for another two years while housing problems are acute and three flats could be built there? "

In fact the Common Lodging House was closed on 1st September, 1949 and has therefore not been registered for a period of 771 days. This matter was not brought before a Court of Summary Jurisdiction whereas Owners of Private Property who do not comply with the various Public Health and Housing Acts are brought before the Magistrate's Court with little delay.

Although the Common Lodging House was closed on 1st September, 1949, the three families mentioned in the Report of the Sanitary Inspector of 5th June, 1948 are still living there in condemned property and in dreadful sanitary conditions and paying rent varying from 8/- to 9/- per week.

The Medical Officer of Health reported on the Common Lodging House on :

3rd February, 1949  
25th March, 1949  
21st July, 1949  
2nd December, 1949  
16th June, 1950  
22nd September, 1950  
6th October, 1950  
8th June, 1951

In my Report of 3rd February, 1949, I pointed out that sanitary conditions were such that 2 lavatories were in use for the 35 inhabitants of the Common Lodging House which included the families living there, while in my Report of 8th June, 1951 I mentioned that 1 lavatory in a state of disrepair had to serve 3 families consisting of 5 Adults and 14 Children. Throughout these years these families were frequently forced to use pans as sanitary conveniences which were subsequently emptied into the lavatories.

In the year 1949 an agreement was reached with the Owner to re-build the premises into 3 flats and the Plans were passed by the Town & Country Planning Authorities on January 12th, 1950.

At the end of the year 1951 no re-building of the premises had been started and the three families had not been re-housed.

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#### DISINFESTATION

During the year, approximately 40 verminous premises (excluding rats and mice) were disinfested and the results obtained were satisfactory. D.D.T. and Gamexane were used in various forms.

The Health Department is notified when a new house has been allocated to a tenant and the old house and furniture are inspected before the tenant takes up his new residence. If required, the premises and furniture are sprayed to ensure that no infestation is carried to new premises. The number of new houses fumigated before the tenants occupied them was 28.

The Commission on the Status of Women  
was established in 1946 by the General Assembly  
of the United Nations. Its mandate was to  
study the status of women in all countries.

The Commission has held many sessions  
and has produced a large body of work.  
It has been instrumental in the development  
of the Convention on the Elimination of  
All Forms of Discrimination Against Women.

The Commission has also been instrumental  
in the development of the Declaration on  
the Elimination of Violence Against Women.  
It has been instrumental in the development  
of the Convention on the Rights of the Child.

The Commission has been instrumental in  
the development of the Convention on the  
Rights of Persons with Disabilities.

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Commission on the Status of Women

United Nations

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## HEALTH SERVICES

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Since the inception of the National Health Service Act, 1946, from the 5th of July, 1948, the Urban District has ceased to be a Health Authority and is now a Sanitary Authority only concerned with Sanitation and Environmental Hygiene. All the Health Services are concentrated under the County Council with a Divisional Office in Bridgend. The following services have, therefore, become a County Council responsibility :-

1. Care of Mothers and Young Children.
2. Domiciliary Midwifery.
3. Health Visiting.
4. Home Nursing.
5. Vaccination and Immunisation.
6. Ambulance Services.
7. Prevention of Illness; Care and After-Care.
8. Domestic Help Service.
9. Duties connected with Lunacy and Mental Health.
10. Provision of Health Centres.

These services are administered through the Divisional Office, County Council Offices, Quarrella Road, Bridgend, with the exception of Lunacy, Mental Health and the County Ambulance Service, which have not been de-centralised.

The Hospitals of Mid-Glamorgan are administered by the Regional Hospital Board through the Mid-Glamorgan Hospital Management Committee in Neath. The Isolation Hospital, the Maternity Home and the General Hospital in Maesteg have, therefore, become the responsibility of the Regional Hospital Board and are administered through the Mid-Glamorgan Hospital Management Committee with a local representation in the Hospital House Committee which sits in Maesteg periodically.

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### (1) SCHOOL HEALTH SERVICES

The Medical Inspection of School children is provided by the County Council who have also established Ophthalmic, Dental and Orthopaedic Clinics. The various age groups are examined periodically and from the school inspections referred to the various clinics if so required.

Cod liver oil is provided for cases of under-nutrition or under-development. In cases of Infectious Disease special steps are taken in conjunction with the School Authorities to exclude all scholars who have been in contact with the patient. Protective measures, immunisation and isolation are, furthermore, under the direction of the Health Department.







(2)

#### MATERNITY AND CHILD WELFARE

The Glamorgan County Council maintains an ante-natal clinic every Monday afternoon in the Maternity and Child Welfare Centre, Church Street, Maesteg. The Regional Hospital Board provides, in addition, ante-natal clinics attended by Local Practitioners in the same building.

Child Welfare Clinics are held every Tuesday morning and afternoon, while, in addition, clinics are held fortnightly in Trinity Church, Nantyffyllon on Thursdays and in the Spiritualist Church, Caerau, on Wednesdays.

The Maternity Home of 11 beds is under the administration of the Mid-Glamorgan Hospital Management Committee and cases are referred to this institution by the General Practitioners of the town. Other cases receive their ante-natal care in the Maesteg Ante-Natal Centre and are delivered by the County Midwives at home or referred to the Mid-Glamorgan Hospital for delivery, abnormalities or emergencies. All Maternity Bookings are now done through the Maternity and Child Welfare Centre in Maesteg.

The Glamorgan County Council also provides for the care and treatment of deformed, mentally defective and handicapped children. These cases are selected from School Medical Inspections and Child Welfare Clinics or referred by General Practitioners. In Maesteg a School Clinic is provided in Plasnewydd School for Dental, Orthopaedic and Refraction cases. Illegitimate, homeless and neglected children are provided for in the Cottage Homes, Bridgend, and through the Welfare Authorities.

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(3)

#### TUBERCULOSIS

Institutions are maintained by the Welsh Regional Hospital Board for the treatment of persons suffering from Tuberculosis. A T.B. Dispensary is held in the M. and C.W. Building, Church Street, Maesteg, on Wednesday and Friday mornings of each week.

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(4)

#### NATIONAL ASSISTANCE ACT, 1948

Since the passing of this Act the former Public Assistance Services ceased and were taken over by the National Assistance Board under the Ministry of National Insurance. The functions of the Relieving Officers have, therefore, been discontinued and replaced by the Officers of the National Assistance Board, two of whom are stationed in Maesteg, with a temporary Office in Church Street, Maesteg.

As under the National Health Insurance everyone is now medically insured, the medical supervision and treatment of necessitous cases has become the responsibility of the Medical Practitioner or the Regional Hospital Board. Other classes of necessitous cases, like homeless, abandoned or neglected individuals, are the responsibility of the Welfare Authorities.



(5)

## INFECTIOUS DISEASES

The Maesteg Isolation Hospital is administered by the Mid-Glamorgan Hospital Management Committee and provides accommodation for 18 patients.

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(6)

## SMALLPOX

Cases of suspected or confirmed smallpox in South Wales will, in future, be admitted in the first instance to Penrhys Hospital, Rhondda. This Hospital can be made ready to admit patients within an hour from the time of notification. Where the Consultant decides that a case should be admitted to a Smallpox Hospital he will arrange directly with Penrhys Hospital for the Hospital to be made ready to receive the patient.

The Cefn Hirgoed Isolation Hospital for Smallpox has now been made available for the Chronic Sick and provides accommodation for 18 patients suffering from Chronic Illness.

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(7)

## GENERAL

The Maesteg General Hospital provides accommodation for 58 patients and is administered by the Mid-Glamorgan Hospital Management Committee on the same lines as the Maternity and Isolation Hospitals.

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(8)

## VACCINATION AND IMMUNISATION

The County Council does not provide for a Vaccination Centre in Maesteg, but arrangements can be made with the Medical Practitioner by those who wish themselves or their children vaccinated.

An Immunisation Clinic is held fortnightly on Thursday mornings in the M & CW Centre, Church Street, Maesteg, where immunisations are performed free of charge.

Diphtheria Anti-toxin is supplied by the Divisional Office in Bridgend, while Vaccination Lymph can be obtained from the Public Health Laboratory in Cardiff.

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(9)

## AMBULANCES

The Ambulance Services are now under the direction of the County Council. ALL CALLS for the Ambulance Service since March 15th, 1950, are dealt with via the Main Station at Aberkenfig (Telephone Number - Aberkenfig 303), while Sub-stations have been established in the Maesteg General Hospital and in Caerau. Requests for ambulances not required until the next day are met by means of a certificate signed by a doctor, nurse or midwife and handed in at the Local Ambulance Station not later than 8 p.m. on the previous day.





In emergencies or ambulances required on the same day, the requests are made by telephone to Aberkenfig and the certificate handed to the ambulance driver when conveying the patient. The conveyance of Maternity Cases is arranged in the same manner. In cases of accidents or other sudden emergencies occurring immediately adjacent to an ambulance sub-station, drivers have been instructed to deal with the emergency and themselves inform the Ambulance Control Station of the action they are taking, provided an ambulance is available in the sub-station at the time of the emergency.

# (10) CLINICS AND TREATMENT CENTRES

The County Council provides for the following Clinics :-

1. Ante-Natal ... Monday afternoon ... Maesteg
2. Child Welfare ... Tuesday all day ... Maesteg
3. Child Welfare ... Wednesday afternoons .. Caerau  
fortnightly
4. Child Welfare ... Thursday afternoons .. Nantuffyllon  
fortnightly
5. School Clinics :-
  - Orthopaedic ... Third Thursday in ... Plasnewydd  
the month
  - Refraction ... Periodically as ... Plasnewydd  
required
6. Ante-Natal and .. Monday afternoons ... Calfarfa  
Child Welfare fortnightly Chapel,  
Gwmfelin
7. Diphtheria  
Immunisation ... Thursday mornings ... Maesteg  
fortnightly
8. Birth Control ... Friday mornings ... Port Talbot  
monthly  
Second and Fourth  
Monday afternoons of .. Bridgend  
each month

The Regional Hospital Board provides for :-

1. Clinics in the Maesteg General Hospital :
  - Medical ... .. Alternative Tuesday afternoons  
Alternative Wednesday mornings
  - Surgical ... .. Alternative Friday afternoons  
Alternative Thursday afternoons
  - Gynaecological .. Alternative Friday afternoons
  - Ophthalmic .... Periodically





E.N.T.	...	Alternative Monday afternoons By Appointment
Dermatology	..	Periodically
Paediatrics	..	Thursday afternoons (once monthly)
Radiology	...	Daily

2. Ante-Natal Clinics for General Practitioners in relation to the Maternity Home in the Child Welfare Centre, Maesteg.
3. Chest Clinics on Wednesday and Friday mornings in the Maesteg T.B. Dispensary, Child Welfare Centre, Maesteg.
4. Venereal Diseases - V.D. Clinic, opposite General Station, Port Talbot. Treatment is free and confidential.

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(11)

#### LABORATORY SERVICES

Bacteriological and Pathological examinations are carried out free of charge by the Emergency Public Health Laboratory at Cardiff. Chemical Analysis is undertaken by the Cardiff and County Public Health Laboratory for which a charge is made.

Samples of water, milk and ice-cream are sent for analysis from time to time, and so are specimen of swabs requiring bacteriological examination.

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1. The first part of the report  
 2. The second part of the report  
 3. The third part of the report  
 4. The fourth part of the report  
 5. The fifth part of the report

The following table shows the results of the experiments conducted over a period of six months. The data indicates a significant improvement in the efficiency of the process, with a reduction in waste and an increase in output. The results are summarized in the table below.

### Experimental Results

The experimental results show that the proposed method is highly effective in reducing the time and cost of the process. The data collected over the six-month period shows a consistent improvement in the efficiency of the process, with a reduction in waste and an increase in output. The results are summarized in the table below.

## GENERAL PUBLIC HEALTH

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### INFLUENZA EPIDEMIC, 1951

This Epidemic which affected the Urban District in the beginning of the year, reached it's peak in the weeks commencing January 15th, 1951 until the week commencing January 29th and began to subside from February 5th, 1951.

The Epidemic was generally of a mild type, the disease starting with dramatic suddenness, lasting for about a week and then disappearing again as suddenly as it started. Many patients were not incapacitated at all. In children the disease was very mild with few complications resulting. In the older age-groups and especially in those suffering from Debility, Chronic Bronchitis or Pneumokoniosis, the disease took a very rapid and severe course. Pneumonia developed and was often fatal in 24 hours before sulpha-drugs or antibiotics could have much effect.

The clinical form presented a picture of Rigor, Vomiting, General Toxaemia, followed later by Bronchitis, Pneumonia and sometimes Pleurisy. The Pneumonia was often localized in the Left Base. Many patients complained even 2 weeks after the attack of "feeling very tired."

On the average the disease lasted one week and it's severity increased with the age of the individuals. The incidence of the disease has been heavy but exact figures are not available as the local National Insurance Office does not maintain records of sickness claims made in respect of specific ailments. In Maesteg the School Attendance in the months November, December and January was 75.3% against 83.1% in the year 1949-50.

The deaths from Pneumonia, Influenza and Acute Bronchitis consisted of 6 males and 9 females in the period 4th November, 1950 until 3rd February, 1951. All deaths were over the age of 53.

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### POLIOMYELITIS

We are grateful to be able to report that no cases of Poliomyelitis or Polio-Encephalitis occurred in the Maesteg Urban District in the year 1951.

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### NEW FACTORIES, EWENNY ROAD, MAESTEG

The four factory buildings were erected between 1946 and 1950 and are all of the same design and construction. As these buildings have been specially built and designed for factory accommodation little needs to be said about the construction and facilities of the premises. Heating and Lighting are of the highest order while a modern Exhaust-system ensured an abundant circulation of fresh air. Lavatories and Wash-ups are provided both for the working and managerial staffs with a supply of hot and cold water.

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The Canteen is situated in a separate building equipped with the most up-to-date Cooking Apparatus and Exhaust-system. It is to be hoped that these factory buildings will always remain fully occupied as it is difficult to imagine premises better suited and provided with more comfort for manufacturing purposes than the buildings in Ewonny Road.

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#### MARKET HYGIENE

In spite of the Report of Dr. Kinscy of 10th January, 1947 the Reports of the Medical Officer of Health of 5th May and 22nd September, 1950 and the Minute No. 185 "Water Supply - Maesteg Market" of 27th June, 1950, in which it was resolved to place water points at the bottom of the Open Market, no further action has been taken to implement this part of the Minute. It will, consequently, be difficult to adhere to Part II, Paragraph 2; Paragraph 4, Sections c and d; to Part III, Paragraph 7, Section b; Paragraph 9, Section a, and to Part III Paragraph 10, of the new Bye-Laws for Food Hygiene adopted by the Council on January 10th, 1950.

The only available water point in the Open Market is situated inside the basement of the Council Offices in the furnace room.

On the 14th December, 1951, the Market Yard was visited by approximately 10,000 people (Minute 908 of 18th December, 1951).

In the year 1951 the Market Hall has been white-washed in a light colour and the ceiling has been re-painted together with the woodwork of doors and windows and the pillars supporting the roof. This has been a great improvement. The stalls have, however, not been re-painted yet and these probably need most attention as they are in a state of severe neglect. (Re-painting of stalls was started in the month of March, 1952).

Other improvements in the Market suggested are the supply of Hot Water, the improvement of the Lighting System and the provision of Special Stalls with tiled or marble display slabs for the exclusive sale of meat and fish. An improvement in the lighting of the Market Hall would undoubtedly be attained if the present scattered electric lamps were re-placed by strip-lighting from the roof in the manner this has been done for the Council Chamber.

A proper water supply for the Maesteg Market is advisable on the following grounds :-

- (1) Epidemiological potentialities which may not only affect Maesteg but in addition a large area surrounding the Urban District as the Market draws a population from such distant points as Port Talbot, Bridgend, Ogmore & Garw and all the valleys in the vicinity.
- (2) Legal complications which may arise if Market Hygiene lags far behind the hygiene of Private Shops and Trades.
- (3) The ever-changing food aspects of a Market and the fluctuation in the sale of food in such places.

The following is a list of the names of the persons who have been appointed to the various positions in the Department of the Interior, for the year 1881.

DEPARTMENT OF THE INTERIOR

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- (4) The new Food Cleanliness Campaign pursued all over the Country.
  - (5) The adherence to the new Food Bye-Laws which came into force on 31st July, 1950.
- 

INDUSTRIAL COURT AWARD NO. 2321 OF 7TH MAY, 1951

In my letter to the Clerk of the Urban District Council dated 24th July, 1951, the consideration of this Award was brought to the attention of the Urban District Council and reference was made to the five Circulars issued on this subject. The consideration of the Award was deferred from month to month until in Minute No. 620 of 18th October, 1951, a Report was requested from the Clerk of the Urban District Council. The financial implications of the Award were reported on by the Treasurer on 16th October, 1951. As no Report from the Clerk appeared and the consideration of the Award disappeared from the Agenda for the Finance Committee of 29th November, 1951, the Medical Officer of Health brought the matter for the second time before the Council in his communication to the Clerk of the Urban District Council of 26th November, 1951. This letter was ignored as it was not mentioned in the Council Minutes so that the matter was referred to the British Medical Association. The Award was subsequently implemented on February 5th, 1952.

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NATIONAL ASSISTANCE ACT, 1948, PART III, SECTION 31

" A Local Authority may make contributions to the funds of any Voluntary Organization whose activities consist of or include the provision of Recreation or Meals for the Old People. "

At the end of the year 1950 it was felt by the Divisional Office in Bridgend that too much time of Home Helps was required for "sitting in" in order to keep aged or chronic sick people company. Due to shortage of Home Helps these duties could far better be undertaken by Voluntary Workers and it was with this purpose in mind that Old People's Welfare Committees were being created. The Divisional Office therefore enquired whether the Maesteg Urban District was considering the setting-up of Old People's Welfare Committees.

In March, 1951, it had been ascertained by the Divisional Office that the number of people in Maesteg needing "sitters-in" was not more than half a dozen while those needing meals counted about a dozen.

The problem, therefore, appeared to be very small and did not justify a Special Organization to foster the welfare of Aged and Chronic Sick. This Social Service could be left to those Voluntary Organizations already in existence and which specialised in this kind of Welfare Work.

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NATIONAL ASSISTANCE ACT, 1948  
NATIONAL ASSISTANCE (AMENDMENT) ACT, 1951  
REMOVAL OF PERSONS IN NEED OF CARE AND ATTENTION

Circular 37/51 (Wales) of the Welsh Board of Health to all Local Authorities dated 30th August, 1951, with regard to the mentioned legislation has not been considered by the Maesteg Urban District Council during the year 1951.

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INFANT DEATHS, 1951

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Sex	Age	Cause of Death
F	6 months	1a) Broncho-Pneumonia b) Mongolism
M	1 day	1a) Premature Birth
F	1 hour	1a) Premature Birth
F	2 days	1a) Cerebral Injuries b) Long Labour; Occipito Posterior Position; Forceps Delivery
F	1 month	1a) Broncho-Pneumonia
F	10 months	1a) Acute Lobar Pneumonia following Bronchitis
M	1 day	1a) Atelectasis Pulmonum
M	2 months	1a) Acute Broncho-Pneumonia
M	1 day	1a) Prematurity
F	1 week	1a) Convulsions b) Marasmus
M	3 months	1a) Cachexia b) Congenital Malformation of Mouth and Face
M	1 month	1a) Spina Bifida b) Hydrocephalus
F	1 day	1a) Atelectasis - Congenital.
M	1 hour	1a) Congenital Deformity of Head, Feet and Arms.
F	3 months	1a) Convulsions as a result of Acute Enteritis
M	10 hours	1a) Pulmonary Oedema b) Inhalation of Liquor Amnii II) Prematurity
M	3 days	1a) Prematurity
M	1 day	1a) Prematurity and Retarded Development (One of Twins)
M	1 day	1a) Prematurity and Retarded Development (One of Twins)

Total Number of Deaths ... 19

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OPHTHALMIA NEONATORUM

There were no cases Notified during the year and therefore none requiring treatment.

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PUBLIC HEALTH ACT, 1936 - SECTION 176  
POWER OF LOCAL AUTHORITY IN RESPECT OF THE  
PREVENTION AND TREATMENT OF  
BLINDNESS

All arrangements under this Section are undertaken by the Glamorgan County Council.

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MASS RADIOGRAPHY

The Mass Radiography Unit of the Welsh Regional Hospital Board visited Maesteg in the month of July of the reporting year.

In this Survey a total of 3,254 individuals in the general population was examined, against a total of 2,627 in the year 1949. I am exceedingly grateful that so many people have taken advantage of this 2-yearly Survey which is of paramount importance in Preventive Medicine. The procedure was much simplified on this occasion as it was no longer necessary to distribute forms to individual schools and various social centres, while posters displayed on hoardings in the District together with the very active Public Address Equipment of the Regional Hospital Board ensured satisfactory propaganda which has been so successful, that in the year 1951, 627 more individuals were X-Rayed than in 1949. If we further take into consideration that the Mass X-Ray was here during the Miners' Holiday and the School Holidays, the Service has booked a very great success indeed. A further simplification in the Service was achieved by the fact that it was no longer necessary for people to strip to the waist. This, I am sure, has been of the greatest convenience and has, in no small measure, contributed to the success of the Survey.

Table I gives the total number of individuals X-Rayed, divided in age groups and the percentage of abnormalities found.

Table II gives a detailed list of 'Other Abnormalities' excluding Tuberculosis.

Once again the Service has done excellent work and I wish to express my gratitude both to the Public in Maesteg and to the Radiography Service for having contributed so greatly and spontaneously to the success of the Survey, the advantage of which, from the point of view of Health, cannot be equalled.

THE UNIVERSITY OF CHICAGO  
DEPARTMENT OF THE HISTORY OF ARTS  
AND ARCHITECTURE

THE UNIVERSITY OF CHICAGO PRESS  
54 EAST LAKE STREET, CHICAGO, ILL. 60601

MEMORANDUM

TO: THE BOARD OF TRUSTEES  
FROM: THE DEPARTMENT OF THE HISTORY OF ARTS  
SUBJECT: [Illegible]

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I. ANALYSIS IN AGE GROUPS - GENERAL POPULATION

	GRAND TOTAL	Under 15 M	Under 15 F	15 - M	15 - F	25 - M	25 - F	35 - M	35 - F	45 - M	45 - F	60 and Over M	60 and Over F	TOTALS M	TOTALS F
Total Number of Persons Examined Normal and Abnormal	3,254	12	9	202	427	360	333	388	271	528	319	281	124	1,771	1,483
Total Number Found to be Abnormal	481 or 14.78%	2	1	5	8	40	7	109	9	167	23	98	12	421	60
Classification of Abnormal Cases :-															
(a) Definite Pulmonary Tuberculosis	8 or 0.24%	-	1	-	2	1	1	-	-	-	1	2	-	3	5
(b) Needing further Observation for Pulmonary Tuberculosis	10 or 0.31%	1	-	1	1	1	-	2	-	2	2	-	-	7	3
(c) Other Abnormalities of Chest	463 or 14.23%	1	-	4	5	38	6	107	9	165	20	96	12	411	52





II.            DETAILS OF 'OTHER ABNORMALITIES'

		<u>Male</u>	<u>Female</u>	<u>Total</u>
Pneumokoniosis	...	329	-	329
Silico-Tuberculosis	...	2	-	2
Healed Post-Primary P.T.	...	18	10	28
Acquired Heart Disease	...	8	18	26
Pleural Thickening	...	10	7	17
Bronchitis & Emphysema	...	11	4	15
Bony Abnormality	...	9	5	14
Pulmonary Fibrosis	...	9	2	11
Healed Primary P.T.	...	8	2	10
Bronchiectasis	...	1	2	3
Basal Fibrosis	...	3	-	3
Calcified cyst	...	1	1	2
Pneumonitis	...	1	-	1
Congenital Heart Disease	...	1	-	1
Substernal Thyroid	...	-	1	1
		<hr/>		
Totals	...	411	52	463
		<hr/> <hr/>		



## TUBERCULOSIS

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In the course of the year, the number of Notifications of Tuberculosis (Pulmonary and other forms) received, was 31. This figure shows a decrease of 7 on the previous year.

The number of cases of Pulmonary Tuberculosis notified during the year was 8 males and 16 females. Non-Pulmonary Tuberculosis 3 males and 4 females.

The deaths from Pulmonary Tuberculosis were 11. There were no deaths from other forms of Tuberculosis.

The distribution of the Notifications and Deaths is as follows :-

<u>WARD</u>		<u>PULMONARY</u>	<u>NON-PULMONARY</u>	<u>DEATHS</u> <u>(PULMONARY)</u>
Caerau	...	12	2	4
Nantylfyllon	...	5	2	3
East	...	3	1	1
West	...	4	2	3
<hr/>				
Total	...	24	7	11

At the end of the year, after death removals, cures, altered diagnosis, and transfers had been adjusted, there were 203 cases on the Register, made up as follows :-

		<u>PULMONARY</u>	<u>NON-PULMONARY</u>
Males	...	69	25
Females	...	82	27
<hr/>			
Total	...	151	52

No special provision is made by the Council for the treatment of Tuberculosis. This is left to the Medical Practitioner in attendance who, either directly or through the Medical Officer of Health, obtains the assistance of the Welsh Regional Hospital Board.

### PUBLIC HEALTH ACT, 1936 - SECTION 172.

No action was taken by the Council under this Section during the year 1951.

# REPORT

The following report was prepared by the Committee on the part of the Board of Directors of the American Society of Civil Engineers, in accordance with the resolution of the Board of Directors, passed at the meeting held at New York, N. Y., on the 15th day of December, 1900, and is hereby submitted to the Association.

The Committee on the part of the Board of Directors of the American Society of Civil Engineers, in accordance with the resolution of the Board of Directors, passed at the meeting held at New York, N. Y., on the 15th day of December, 1900, and is hereby submitted to the Association.

TABLE I	
1	100
2	100
3	100
4	100
5	100
6	100
7	100
8	100
9	100
10	100

The following report was prepared by the Committee on the part of the Board of Directors of the American Society of Civil Engineers, in accordance with the resolution of the Board of Directors, passed at the meeting held at New York, N. Y., on the 15th day of December, 1900, and is hereby submitted to the Association.

1	100
2	100
3	100
4	100
5	100
6	100
7	100
8	100
9	100
10	100

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TUBERCULOSIS - 1951  
PULMONARY TUBERCULOSIS NOTIFICATIONS

YEAR	0 - 1 M F	1 - 5 M F	5 - 15 M F	15 - 25 M F	25 - 35 M F	35 - 45 M F	45 - 55 M F	55 - 65 M F	65 & upwards M F	TOTALS M F Totals
1941			2	7	3	1	2	3	1	17 18 35
1942		2	1	7	3		2	1	2	17 11 28
1943				7	3		1			13 18 31
1944			1	5	4		1	1	1	17 15 32
1945		1		3	3		1			15 19 34
1946				6	2		1	1	1	8 19 27
1947			3	9	3		2	2	4	21 19 40
1948		1		5	7		2			12 20 32
1949		1	2	8	4		4	1	2	24 15 39
1950		4	1	5	5		3	1	1	17 15 32
1951			1	6	4		2		1	8 16 24

PULMONARY TUBERCULOSIS DEATHS

YEAR	0 - 1 M F	1 - 5 M F	5 - 15 M F	15 - 25 M F	25 - 35 M F	35 - 45 M F	45 - 55 M F	55 - 65 M F	65 & upwards M F	TOTALS M F Totals
1941				1	3	1	1		2	9 10 19
1942			2	4	3	1	3	1	1	11 3 14
1943				4				1		11 9 20
1944				4			3			7 11 18
1945			1	3		2	2	1	1	10 8 18
1946				2	3	1	1			5 6 11
1947				4	2		1	1	3	9 8 17
1948			1	3	2	1	1		2	5 6 11
1949				5	4	2	1			4 13 17
1950				1	5	1	1	1	2	9 4 18
1951					3	1	1		2	7 4 11



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# NON-PULMONARY TUBERCULOSIS NOTIFICATIONS

YEAR	0 - 1		1 - 5		5 - 15		15 - 25		25 - 35		35 - 45		45 - 55		55 - 65		65 & upwards		TOTALS	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
1941					1	2	1	1	3	1	1		1			1			5	3
1942			2		2	2	1	2	1	1									7	2
1943			1	1	2	2	2	1	1	1									6	6
1944			1	1	9	1	5	1										16	5	12
1945			1		1	7	4	3											13	21
1946		1		2	5	2	2	2	1	2							1		7	20
1947			2	2	2	3	1	2	2				1					8	6	14
1948			3	2	2	2	1	1	1				1					8	7	15
1949			3	2	2	2	1	3						1				5	7	12
1950	1		3		2	2	1	1	2	1	1							6	6	12
1951			1	1	2	1	1	1		2								3	4	7

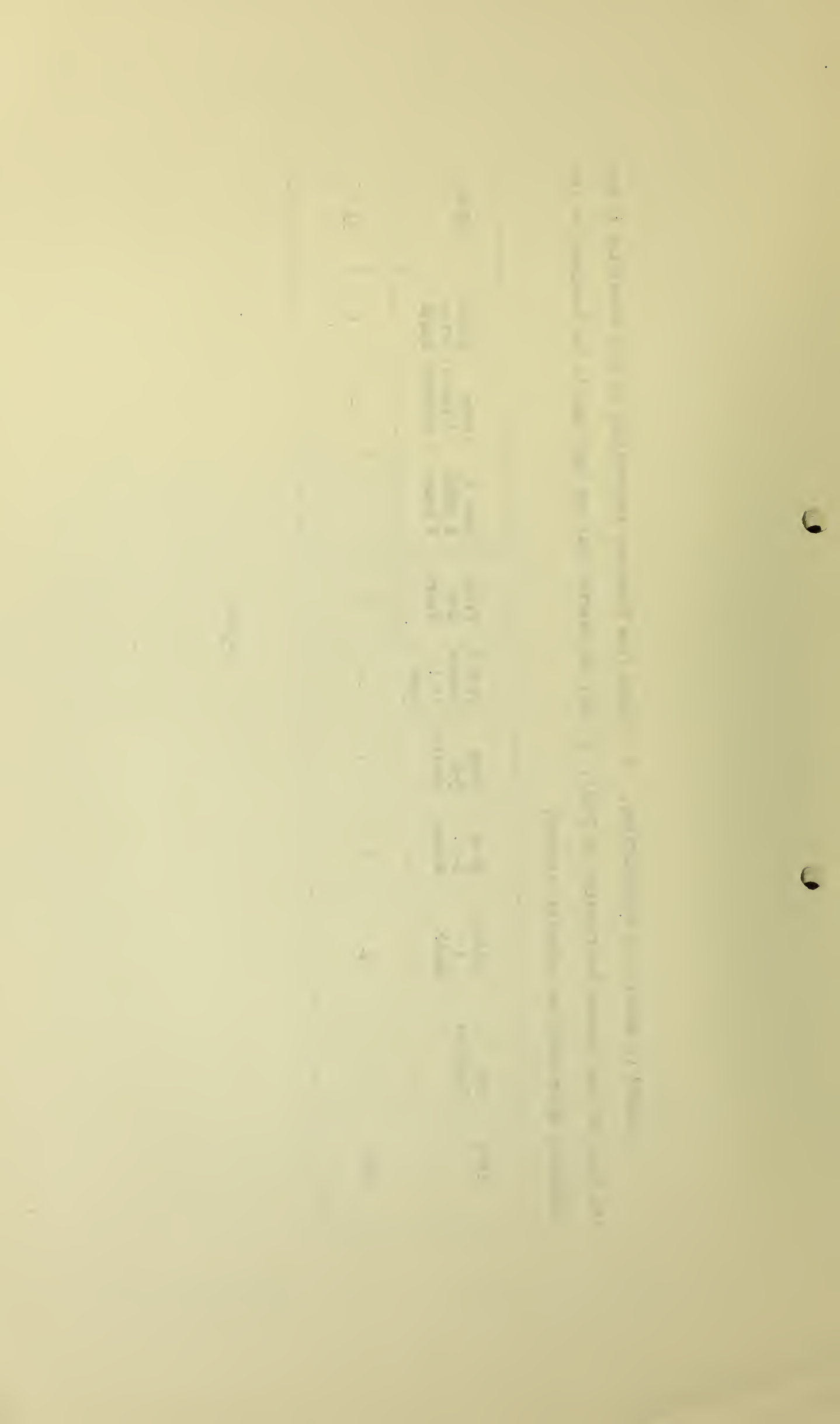
# NON-PULMONARY TUBERCULOSIS DEATHS

YEAR	0 - 1		1 - 5		5 - 15		15 - 25		25 - 35		35 - 45		45 - 55		55 - 65		65 & upwards		TOTALS	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
1941						1	1	1			1								3	1
1942			1		2		1	1			1								2	3
1943							1		1										4	5
1944			1		2		1	1									1		3	4
1945						2													1	4
1946		1																	3	1
1947			1	1	1		1	2				1							3	7
1948				1			1						1						1	4
1949				...		...	...	...				...							...	...
1950		...				1									1				1	...
1951		...																	...	...



DEATHS IN RELATION TO NOTIFICATIONS. The deaths from Pulmonary Tuberculosis in 1951 classified to show the lapse of time between Notification and Death. It will be observed that one case came to the knowledge of the Department after death had actually occurred.

YEAR	Not Notified	Within 1 Month	From 1-3 Months	From 3-6 Months	From 6 Months to 1 Year	From 1-2 Years	Over 2 & under 4 years	From 4 Years Upwards	Known after Death	TOTAL
1951	-	2	1	1	-	3	3	-	1	11





## TUBERCULOSIS RE-HOUSING

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In the Annual Report for 1950 an outline has been given of the day-to-day administration of applications on Tuberculous grounds and the purpose of introducing a Tuberculosis Re-Housing Register was the ascertainment of the most urgent and necessitous cases from an infectious point of view.

Tuberculosis is causing most harm to the community by attacking the younger and most productive age groups. In the age group 15-50 the annual mortality far exceeds deaths caused by any other diseases. From a prediction of the Royal Commission on Population (1949), it would seem that this severe and recurrent loss may become even greater. The number of young adults, aged 15-40, is likely to decline by 1,400,000 in the next 15 years, while 90% of the total Tuberculosis Mortality together with a vast amount of morbidity, is due to Pulmonary Tuberculosis. It is, therefore, of paramount importance that this disease should be held in check and the spread of infection prevented in every possible way. In England and Wales there were, in 1951, approximately 49,400 Notifications of Tuberculosis and 34,120 beds available for treatment, while the waiting list for admission to Sanatoria in England and Wales alone was 7,000.

Lack of accommodation in Sanatoria has made the segregation of infectious cases more and more difficult and as Tuberculosis is, at present, the greatest problem in Preventive Medicine (some 265 deaths per week resulting from Tuberculosis in England and Wales), the modern view held is that those cases who have had the chance of recovery in a Sanatorium should, at all cost, be prevented from breaking down again by giving them good sanitary conditions to live in after discharge. It has consequently become more difficult, if not impossible, to bring into operation the -

Public Health Act, 1936, Section 172.

The principle of giving special consideration to Tuberculosis cases was adopted by the Maesteg Council on July 13th, 1950, when it was resolved that one patient in each Ward should be re-housed for every 64 houses in the Turberville Estate. This consideration was long overdue as in my Reports of 7th November, 1949 and 5th December, 1949 to the Chairman & Members of the Housing Committee, I have pointed out that the re-housing of Tuberculosis cases was unsatisfactory and a re-consideration of this problem imminent, while the great confusion has been fully exposed, resulting from the absence of a Tuberculosis Re-Housing Register.

During the year the difficulty arose that the basis on which the Tuberculosis Register was built, was being removed if no Information with regard to Tuberculous Applicants was supplied to the Medical Officer of Health by the Treasurer's Department. Consequently the Medical Officer of Health would not be able to function under the following legislation :-

- (1) Sanitary Officers (Outside London) Regulations, 1935  
Section 17, paragraphs 1 and 2
- (2) Tuberculosis Regulations, 1930, Section 11, paragraph 1  
Substituted by the Tuberculosis Regulations, 1952  
on 1st May, 1952
- (3) Tuberculosis Regulations, 1930, Section 12, paragraph 1  
Substituted by the Tuberculosis Regulations, 1952  
on 1st May, 1952

The first part of the book is devoted to a general survey of the history of the subject. It begins with a discussion of the early attempts to explain the phenomena of light, and then proceeds to a more detailed account of the development of the theory of light as a wave phenomenon. The author discusses the work of Huygens, Newton, and Young, and shows how the wave theory of light was established as the correct one.

The second part of the book is devoted to a detailed discussion of the properties of light. It begins with a discussion of the propagation of light, and then proceeds to a discussion of the reflection and refraction of light. The author discusses the laws of reflection and refraction, and shows how they can be derived from the wave theory of light. He then discusses the interference of light, and shows how it can be used to measure the wavelength of light. Finally, he discusses the diffraction of light, and shows how it can be used to determine the structure of crystals.

The third part of the book is devoted to a discussion of the applications of the theory of light. It begins with a discussion of the uses of light in the arts and sciences, and then proceeds to a discussion of the uses of light in the technology of the future. The author discusses the possibilities of using light for communication, and shows how it can be used to transmit information over long distances. He also discusses the possibilities of using light for energy, and shows how it can be used to power machines and devices.

### THE THEORY OF LIGHT

The theory of light is one of the most important branches of physics. It deals with the properties of light, and with the ways in which light interacts with matter. The theory of light has a long history, and has been the subject of much research and speculation. In this book, we will discuss the basic principles of the theory of light, and we will show how they can be used to explain the phenomena of light.

The first part of the book is devoted to a general survey of the history of the subject. It begins with a discussion of the early attempts to explain the phenomena of light, and then proceeds to a more detailed account of the development of the theory of light as a wave phenomenon. The author discusses the work of Huygens, Newton, and Young, and shows how the wave theory of light was established as the correct one.

- (1) The wave theory of light.
- (2) The particle theory of light.
- (3) The quantum theory of light.
- (4) The relativistic theory of light.
- (5) The modern theory of light.

This matter was made the subject of a Special Report on 22nd November, 1951 and the state of affairs subsequently corrected.

At the end of the year a further difficulty arose as the 4 cases of Pulmonary Tuberculosis recommended by the Medical Officer of Health in March, 1951 had not been re-housed, with the exception of No. 2 (see below). As only 4 Tuberculosis cases in every 64 applicants for houses are being re-housed, a careful selection has to be made.

Environmental Forms are sent by the Divisional Medical Officer to District Medical Officers under the Tuberculosis Regulations, 1930 (Substituted by the Tuberculosis Regulations, 1952), for the Prevention of Tuberculosis. If, after the careful selection from the Tuberculosis Re-Housing Register and a personal check-up by the Medical Officer of Health his recommendations are ignored, it would serve no useful purpose to receive Environmental Forms under those Regulations. The greater part of the work of Health Visitors in ascertaining overcrowding, etc., would be lost, while the Medical Officer of Health would be unable to function under :-

- (1) Tuberculosis Regulations, 1930, Section 11, paragraph 1  
Substituted by the Tuberculosis Regulations, 1952 on 1st May, 1952
- (2) Tuberculosis Regulations, 1930, Section 12, paragraph 1  
Substituted by the Tuberculosis Regulations, 1952 on 1st May, 1952

Neither are re-housing matters dealt with in Committee as recommended in Circular 31/49 of the Welsh Board of Health, dated 11th April, 1949 with regard to the Selection of Tenants, so that no re-housing discussions are taking place. In Committee the medical and financial background of such patients should be fully discussed and every possible aid given.

The Tuberculosis Re-Housing Register in the beginning of the year 1952, counted 17 applicants suffering from Pulmonary Tuberculosis; 3 cases of Pulmonary Tuberculosis were re-housed in the year 1951, while in my Report of 5th December, 1949 to the Maesteg Urban District Council I have pointed out that 7 cases of Tuberculosis were re-housed in the period 1942 - 1949. If the rate of 3 cases per year were continued it will take approximately 6 years to clear the present list, irrespective of other forms of Tuberculosis and new names of Pulmonary Tuberculosis added to the list in the year 1952.

In my Special Report of 22nd November, 1951, which was ignored, as no Minute was recorded on the matter, I requested the transfer of the administration of Tuberculosis applicants to the Health Department. This would involve a transfer of say about 25 names in a total of 634 applicants for houses which, in our opinion, can involve no difficulties whatsoever.

#### RECOMMENDATIONS OF 19TH MARCH, 1951

- Case No. 1 : Three members affected with Tuberculosis.  
Gaerau Mother died recently. One boy age 4 and one boy age 3 admitted to Sanatorium. Sanitary circumstances very bad. Date of application 30th July, 1949. Certificate to hand. (Family left district in November, 1951).







- Case No. 2 : Patient age 4. Discharged from Sanatorium.  
Nantylfyllon Pulmonary Tuberculosis. Date of application 17th November, 1947. No Certificate to hand yet. House personally inspected. Family lives in basement. Husband, wife and 4 children sleep in same bedroom. Sanitary circumstances very bad (Re-housed 15th December, 1951).
- Case No. 3 : Patient age 10. Pulmonary Tuberculosis.  
Maesteg Date of application 25th October, 1946. Certificate to hand. Is the only Tuberculosis patient in the East Ward (Ceased to be an applicant in 1952).
- Case No. 4 : Patient age 30. Sub-tenant. Discharged from  
Maesteg Sanatorium. Date of application 27th August, 1948. Certificate to hand. Tenant is very keen to have him re-housed as there are children in the Tenant's family. County Medical Officer of Health has been informed by Tenant and been asked to provide a house (Patient died 6th May, 1952 and in spite of 2 certificates of his own Doctor, 2 certificates from the Tuberculosis Officer, 2 recommendations of the Medical Officer of Health and 2 letters of Inquiry of the County Medical Officer, was not re-housed. Patient left his sick bed on 9th January, 1952 to plead the County Medical Officer for a house. Three children were exposed to Tuberculous Infection in this place where the patient was a lodger while instead of him, a Tuberculous patient was re-housed who lived in her own house in excellent sanitary conditions and with no evidence of overcrowding).
-



SUMMARY OF THE WORK OF THE  
SANITARY DEPARTMENT DURING THE YEAR 1951

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INSPECTIONS :-

Water Supply	....	....	....	....	240
Drainage	....	....	....	....	69
Stables and Piggeries	...	....	....	....	11
Offensive Trades	....	....	....	....	-
Factories and Workshops		....	....	....	38
Bakehouses	....	....	....	....	68
Public Conveniences	....	....	....	....	46
Theatres, etc.	....	....	....	....	12
Refuse Collection and Disposal	...	....	....	....	47
Rats and Mice	....	....	....	....	31
Inspections of Houses under Public Health and Housing Acts	...	....	....	....	1,134
Overcrowding	....	....	....	....	30
Verminous Premises	....	....	....	....	20
Infectious Diseases	....	....	....	....	18
Inspection of Food Shops		....	....	....	330
Dairies	....	....	....	....	24
Ice-Cream Premises	....	....	....	....	57
Slaughterhouses	....	....	....	....	375
Fried Fish Shops	....	....	....	....	38

THE HISTORY OF THE  
CITY OF BOSTON

1630	1631	1632	1633	1634
1635	1636	1637	1638	1639
1640	1641	1642	1643	1644
1645	1646	1647	1648	1649
1650	1651	1652	1653	1654
1655	1656	1657	1658	1659
1660	1661	1662	1663	1664
1665	1666	1667	1668	1669
1670	1671	1672	1673	1674
1675	1676	1677	1678	1679
1680	1681	1682	1683	1684
1685	1686	1687	1688	1689
1690	1691	1692	1693	1694
1695	1696	1697	1698	1699
1700	1701	1702	1703	1704
1705	1706	1707	1708	1709
1710	1711	1712	1713	1714
1715	1716	1717	1718	1719
1720	1721	1722	1723	1724
1725	1726	1727	1728	1729
1730	1731	1732	1733	1734
1735	1736	1737	1738	1739
1740	1741	1742	1743	1744
1745	1746	1747	1748	1749
1750	1751	1752	1753	1754
1755	1756	1757	1758	1759
1760	1761	1762	1763	1764
1765	1766	1767	1768	1769
1770	1771	1772	1773	1774
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1780	1781	1782	1783	1784
1785	1786	1787	1788	1789
1790	1791	1792	1793	1794
1795	1796	1797	1798	1799
1800	1801	1802	1803	1804
1805	1806	1807	1808	1809
1810	1811	1812	1813	1814
1815	1816	1817	1818	1819
1820	1821	1822	1823	1824
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1875	1876	1877	1878	1879
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1885	1886	1887	1888	1889
1890	1891	1892	1893	1894
1895	1896	1897	1898	1899
1900	1901	1902	1903	1904
1905	1906	1907	1908	1909
1910	1911	1912	1913	1914
1915	1916	1917	1918	1919
1920	1921	1922	1923	1924
1925	1926	1927	1928	1929
1930	1931	1932	1933	1934
1935	1936	1937	1938	1939
1940	1941	1942	1943	1944
1945	1946	1947	1948	1949
1950	1951	1952	1953	1954
1955	1956	1957	1958	1959
1960	1961	1962	1963	1964
1965	1966	1967	1968	1969
1970	1971	1972	1973	1974
1975	1976	1977	1978	1979
1980	1981	1982	1983	1984
1985	1986	1987	1988	1989
1990	1991	1992	1993	1994
1995	1996	1997	1998	1999
2000	2001	2002	2003	2004
2005	2006	2007	2008	2009
2010	2011	2012	2013	2014
2015	2016	2017	2018	2019
2020	2021	2022	2023	2024



RENT & MORTGAGE INTEREST RESTRICTIONS  
ACTS, 1920 TO 1933 :

During the year under review, 2 Rent Certificates were issued.

NOTICES SERVED :

During the year, 98 Abatement Notices under Section 93 of the Public Health Act, 1936, were served.

32 Notices under Section 138, Public Health Act, 1936 and Section 30, Water Act, 1945, were served, to provide dwellings with a sufficient supply of water.

The following Notices were served, in addition, under various Sections of the Public Health Act, 1936 and the Housing Act, 1936 :-

<u>ACT</u>		<u>NO. OF NOTICES SERVED</u>
Public Health Act, 1936 :-		
Section 39(i)(c)	.....	6
Section 58	.....	1
Housing Act, 1936 :-		
Section 11 (Time & Place)	.....	1
Section 11 (Demolition Order)	..	1

PROCEEDINGS :

Arising from the Abatement Notices served under Section 93, Public Health Act, 1936, Court Proceedings were instituted against property owners for failure to abate nuisances, etc., from structural and sanitary defects, in respect of 36 properties.

Court Orders were made for the repairs to be carried out in respect of 10 properties.

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# FACTORIES ACTS, 1937 & 1948

1. - INSPECTIONS for purposes of provisions as to health (including inspections made by Sanitary Inspectors) :

Premises (1)	M/c line No. (2)	Number on Register (3)	Inspections (4)	Written Notices (5)	Occupiers prosecuted (6)	M/c line No. (7)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities .....	1	46	42	-	-	1
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority .....	2	37	64	-	-	2
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	3	-	-	-	-	3
Total .....		83	106	-	-	-

Date	Location	Time	Weather	Wind	Temp	Remarks
1901	St. Louis	10:00	Clear	S.W.	75	Left at 10:00
1901	St. Louis	11:00	Clear	S.W.	75	Left at 11:00
1901	St. Louis	12:00	Clear	S.W.	75	Left at 12:00
1901	St. Louis	13:00	Clear	S.W.	75	Left at 13:00
1901	St. Louis	14:00	Clear	S.W.	75	Left at 14:00
1901	St. Louis	15:00	Clear	S.W.	75	Left at 15:00
1901	St. Louis	16:00	Clear	S.W.	75	Left at 16:00
1901	St. Louis	17:00	Clear	S.W.	75	Left at 17:00
1901	St. Louis	18:00	Clear	S.W.	75	Left at 18:00
1901	St. Louis	19:00	Clear	S.W.	75	Left at 19:00
1901	St. Louis	20:00	Clear	S.W.	75	Left at 20:00

St. Louis, Mo.

2. - CASES IN WHICH DEFECTS WERE FOUND

Particulars	M/c Line No.	Number of cases in which defects were found				Number of Cases in which prosecutions were instituted	M/c line No.
		Found	Remodied	Referred To H.M. Inspector	By H.M. Inspector		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Want of cleanliness (S.1) .....	4	1	1	-	-	-	4
Overcrowding (S.2) .....	5						5
Unreasonable temperature (S.3) .....	6						6
Inadequate ventilation (S.4) .....	7						7
Ineffective drainage of floors (S.6) ...	8						8
Sanitary Conveniences (S.7) .....	9						9
(a) Insufficient .....	10						10
(b) Unsuitable or defective .....	11						11
(c) Not separate for sexes .....							
Other offences against the Act (not including offences relating to Outwork)	12						12
Total .....	60	1	1	-	-	-	60

3. - OUT WORK (SECTIONS 110 & 111) :

" NIL "



Table 1: Summary of Data	
Category	Value
Item 1	100
Item 2	200
Item 3	300
Item 4	400
Item 5	500
Item 6	600
Item 7	700
Item 8	800
Item 9	900
Item 10	1000

The following table provides a detailed breakdown of the data presented in Table 1. Each row represents a specific item, and the corresponding value is listed in the right-hand column. The values range from 100 to 1000, increasing in increments of 100.

Item 1: 100  
 Item 2: 200  
 Item 3: 300  
 Item 4: 400  
 Item 5: 500  
 Item 6: 600  
 Item 7: 700  
 Item 8: 800  
 Item 9: 900  
 Item 10: 1000

## SUPERVISION OF MILK DISTRIBUTION

### FOOD & DRUGS (MILK, DAIRIES & ARTIFICIAL CREAM) ACT, 1950

During the year, 42 samples of heat-treated and pasteurised milk were submitted to the laboratory for bacteriological examination and were found to be satisfactory.

21 samples of ungraded milk were submitted for examination and 17 were satisfactory.

20 samples taken for the presence of Tubercle Bacilli were satisfactory, no Tubercle Bacilli being present.

---

### THE MILK (SPECIAL DESIGNATION)

#### (PASTEURISED & STERILISED MILK) REGULATIONS, 1949

Under the provisions of the above Regulations, 12 Dealer's Licences to sell milk as "Pasteurised" were issued within the Council's Area.

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### ICE-CREAM

#### THE FOOD & DRUGS ACT, 1938 (SECTIONS 13, 14 & 37)

#### THE ICE-CREAM (HEAT TREATMENT, ETC) REGULATIONS, 1947 TO 1951

8 business premises were registered under the Food & Drugs Act, 1938, for the sale of ice-cream in the Urban Area during 1951. 86% of samples submitted to the Laboratory for bacteriological examination and chemical analysis during 1951 was satisfactory.

At the end of the year, 51 business premises in the Area were on the Department's Register as registered under the Act for the sale or manufacture of ice-cream.

All manufacturers locally complied with the Heat Treatment, etc., Regulations, 1947.

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# THE FOOD & DRUGS ACTS, 1938-1950

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We are indebted to the County Medical Officer for the following summary of articles sampled by the County Sanitary Inspectors during the year :-

Milk	120
Cake Flour Mixture	3
Canned Spaghetti	1
Tapioca Flake	5
Sponge Mixture	4
Cake, Sponge & Pudding Mixture	1
Coffee	1
Macaroni	3
Blancmange	1
Butter	3
Cooking Fat	1
Jelly	1
Self Raising Flour	5
Cheese	2
Currants	1
Cornflour	3
Yorkshire Pudding & Pancake Mixture	1
Boiled Sweets	1
Sultanas	1
Custard Powder	2
Sauce	4
Semolina	1
Vinegar	1
Orange Squash	1
Tinned Peas	1
Tinned Soup	1
Vegetable Salad	1
Mustard	1
Coconut Mixture	1
Bovril	1
Jam	1
Ice-Cream	3
Sage & Onion Stuffing	1
Pickled Onions	1
Mince Meat	1
Baking Powder	1
Sandwich Spread	1
Gelatine	1
Almond Paste	1
Sage Pudding	1
Pudding Mixture	1

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Total	....	186
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One sample of Ice-Cream was found to be deficient in fat and prosecution was instituted against the offender; this resulted in a fine of £1 plus 14/- Analyst's fee.

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2020-2021  
2022-2023  
2024-2025

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## SLAUGHTERHOUSES

Slaughtering, since April, 1940, has been carried out in the Slaughterhouse at Bridgend Road, Maesteg. The Slaughterhouse is under the Management of the Ministry of Food. The main renovations, extensions and repairs were completed in the year 1950 and only some small items were outstanding. The most important of these is a sufficient Water Pressure in the Taps of the Slaughterhouse. A new Water Tank was built in the Roof of the Slaughterhouse in the year 1950 but due to a Feeding-pipe of insufficient diameter, the tank is soon emptied with a subsequent severe fall in the water pressure of the Taps. These findings were communicated by me to the Area Slaughterhouse Agent on the 10th of January, 1951.

A further need was felt for the provision of new Slop Basins in the Slaughterhouse and the Inspection Room. The Area Slaughterhouse Agent informed us at the end of the year that the Ministry of Works had been approached about these matters but no improvements have been carried out during the reporting year.

### CARCASSES INSPECTED AND CONDEMNED

	Cattle including Cows	Calves	Sheep & Lambs	Pigs
Number killed ... ..	1229	592	6137	194
Number inspected ... ..	1229	592	6030	194
ALL DISEASES EXCEPT TUBERCULOSIS				
Whole carcasses condemned	4	-	14	-
Carcasses of which some part or organ was condemned	496	-	580	3
Percentage of the number inspected affected with disease other than Tuberculosis ... ..	40	-	9.8	1.5
TUBERCULOSIS ONLY				
Whole Carcasses condemned	8	-	-	1
Carcasses of which some part or organ was condemned	115	-	-	-
Percentage of the number inspected affected with Tuberculosis ... ..	10	-	-	0.5

### SLAUGHTER OF ANIMALS ACT, 1933

9 Licences were issued to Slaughtermen during the year authorising them to slaughter animals under the Act and the provisions of the Act regarding the humane slaughter of animals, including sheep and lambs, were carried out.

THE HISTORY OF THE  
CITY OF BOSTON

From the first settlement of the city in 1630 to the present time. The city of Boston was founded by a group of Puritan settlers who came to the Massachusetts Bay in 1630. They were led by John Winthrop, who gave the city its name. The city grew rapidly and became one of the most important cities in the colonies. It was the site of the Boston Tea Party in 1773 and the Battle of Boston in 1775. The city was the center of the American Revolution and played a key role in the founding of the United States.

The city of Boston has a rich history and has been the site of many important events. It was the first city in the United States to have a public library and the first city to have a public school. It was also the first city to have a public hospital and the first city to have a public park. The city has a long and proud history and is a city that is proud of its past.

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SUMMARY OF THE MEAT AND OTHER FOODS  
CONDEMNED IN THE YEAR ENDED  
DECEMBER 31ST, 1951

Description.	Reason for Condemnation.	Approximate Weight lbs.
8 Bovine Carcasses	Tuberculosis	4168
11 Part Bovine Carcasses	Tuberculosis	2277
4 Bovine Carcasses	Casualties & Emaciation	1407
65 " Heads	Tuberculosis	650
76 " Lungs	Tuberculosis	380
462 " Livers	Parasitic Diseases	4620
75 " Lungs	Parasitic Diseases	375
Beef	Bone-taint & Bruised	627
373 Sheep Plucks	Parasitic Diseases	786
574 Sheep Livers	Parasitic Diseases	574
14 " Carcasses	Parasitic Diseases & Emaciation	472
1 Pig Carcass	Tuberculosis	53
2 " Plucks	Parasitic Diseases	6
3 " Livers	Parasitic Diseases	6
Total .....		16,401

Other Foods :

Preserved Meat	Decomposition & Blown	1064
" Fruit & Veg.	Decomposition & Blown	610
" Milk	Decomposition & Blown	110
Cheese	Mould	35
Butter	Rancid	36
Misc. Preserved Food	Decomposition & Blown	80
Wet Fish	Decomposition	264
Dry Fish	Decomposition	464
Flour, etc.	Mite Infestation	75
Bacon	Decomposition	111
Total .....		2,849
Eggs	Decomposition	60 dozen



## CONTROL OVER INFECTIOUS DISEASES

For epidemiological investigation and record, premises where cases of Infectious Disease occur are visited by the Sanitary Inspectors. The taking of swabs and immunisation of all contacts is undertaken by the Medical Officer of Health.

Certain cases are removed to the Maesteg Isolation Hospital or, alternatively, for the most suitable isolation of the patient possible.

When the patient is removed to hospital, infected rooms are disinfected immediately afterwards and when the case is isolated at home this is done after termination of the illness. If found necessary, infected clothing, bedding, etc., are removed and steam-disinfected at the Isolation Hospital.

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## RODENT CONTROL

During the year 1951, two complete maintenance treatments of the Council's Sewers were carried out.

The degree of sewer infestation in the Area is fairly low.

The following Table gives an indication of the state of infestation in the Urban District for 1951 :-

Type of Property	No. of Properties Inspected following Complaints	No. of Properties Inspected Otherwise	No. of Properties in which Infestation was discovered	No. of Inspections
Local Authority's Property	10	-	10	35
Dwellings	101	-	70	240
Business Premises	14	-	4	35
Agricultural Property	-	20	-	20





## NEW SEWAGE WORKS, MAESTEG & PENYBONT

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On the 17th December, 1951, I inspected the new Maesteg and Penybont Sewage Works which are being constructed in the Garth Area along the River Llynfi. Roughly these new Sewage Works consist of a system of 9 Sedimentation Tanks. The first 4 Tanks, situated in Garth, will be re-built from 4 Old Sedimentation Tanks 122'6" x 15'6" in size and which are at present being excavated. They act as a Storm Overflow. The crude sewage from the Llynfi Valley flows past these 4 Tanks and is piped to the next 5 Sedimentation Tanks in Llangynwyd, where further sedimentation takes place after the water has first passed through Detritus Channels and Comminutors. From these 5 Sedimentation Tanks the water is distributed over Contact Beds with a system of Dosing Chambers and Cresset Sprinklers and here the actual purification of the sewage takes place by bacterial action. Further diversion in Humus Tanks and Sludge Lagoons completes the sewer-purification after which the water joins the River Llynfi.

The Storm Overflow is a separate system which consists of a series of Overflows along the Llynfi Valley. Each overflow discharges directly into the river after the water in it has reached a certain height. The normal flow in this system joins the Sewage Works and enters at the first system of 4 Sedimentation Tanks.

The sewage from the Penybont Area discharges at present into a much smaller system of Sedimentation Tanks and Contact Beds and flows from here directly into the River Llynfi. This sewage in the new plant will be diverted on to the main sewage flow before it enters the second system of Sedimentation Tanks.

At the end of the year the state of progress in the building of the new Sewage Works consisted of the preparation of the site and the excavation of the old Sedimentation Tanks, two of which are almost empty. Part of the pipes, delivery of which has been the greatest handicap in the progress of building, have now been delivered but the completion of the Works will at least take two years.

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## REFUSE DISPOSAL AND SCAVENGING

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In the year 1951 Refuse collected through the Urban Area is still used for the Reclamation of Land and the areas concerned are the Golf Links, near Mount Pleasant, Neath Road and an area above Duffryn Farm, Caerau. Forty cubic yards are disposed of in this way daily.

Refuse is collected daily by Motor Lorries and the position in Refuse Collection has remained unchanged. No difficulties in manpower were experienced for this service during the year.

A great step forward has been made in providing the new houses at the Turberville Housing Site with Dustbins and such bins have also been supplied to the Brynhoulog Estate in Caerau. Sanitary

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Dustbins are therefore not in universal use in the Urban District and it is hoped that the experiment of providing them to the mentioned Estates will be sufficiently encouraging to extend this public service. The Dustbins are provided by the Council in first instance. From a financial point of view it is imperative that tenants keep their bins in a good state of repair.

If too much damage is done to this type of Council property the Council could apply it's powers requiring occupiers to provide their own receptacles of such size and construction as may be approved by the Council.

There have been few complaints of refuse collection during the year.

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